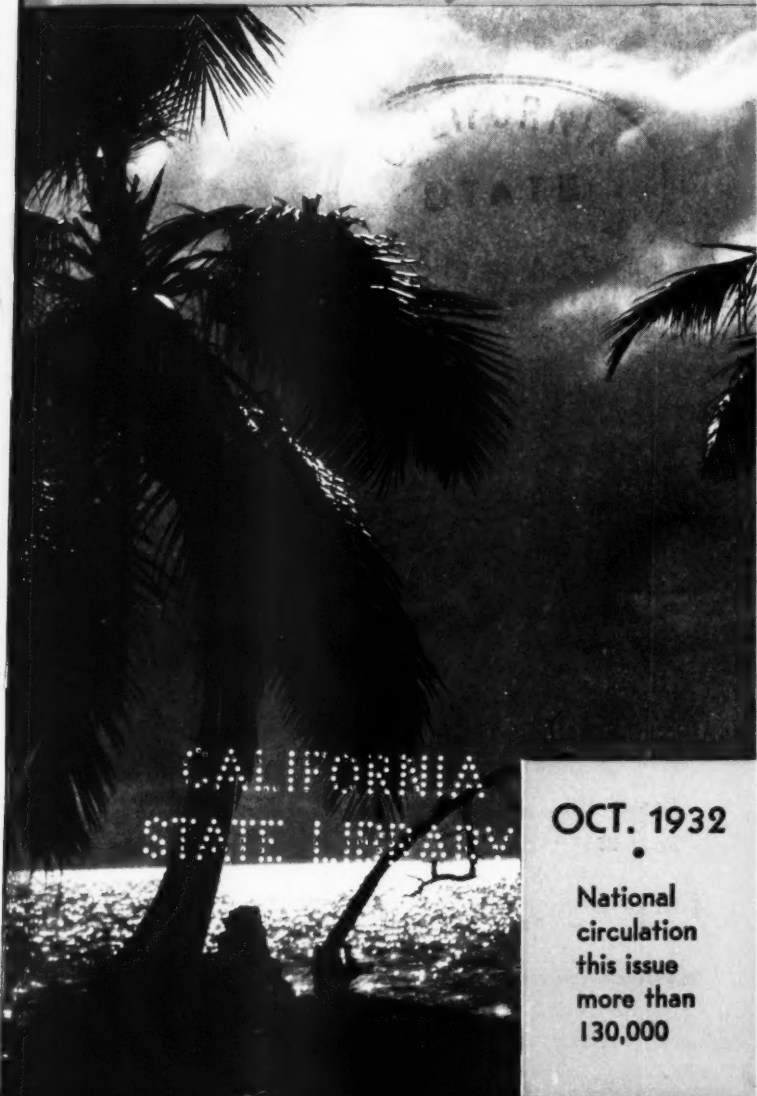


# Medical Economics

Business Magazine of the Medical Profession

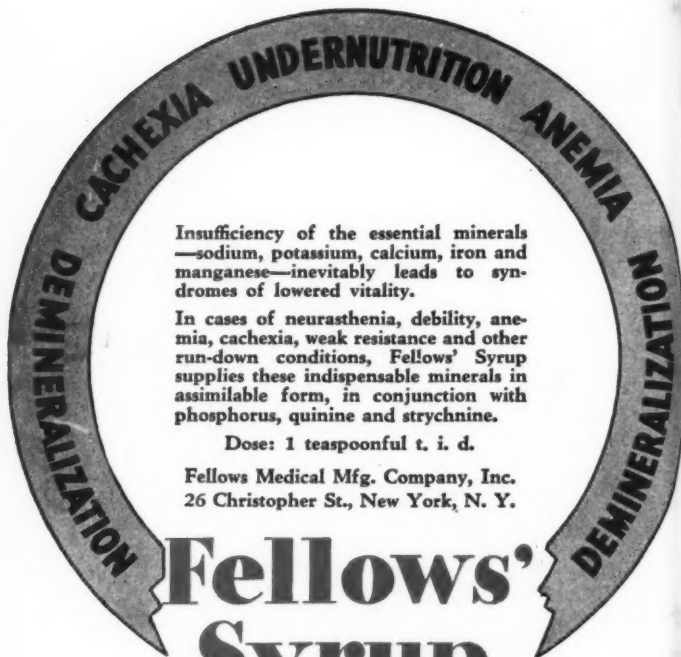
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# MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

OCTOBER, 1932 • VOL. 10, No. 1

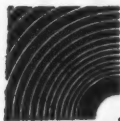
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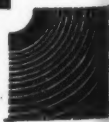
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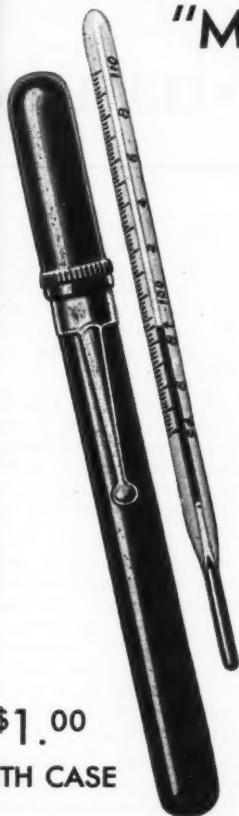
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# Speaking Frankly

## Workers

TO THE EDITOR: I have just finished reading the article "We Needed Action," by E. H. Crane, M.D., and it strikes me as one of the best for some time. Those men in California are certainly workers and they have the problem thoroughly in hand. Their troubles, locally, are exactly like those of the profession throughout the entire nation.

Our county medical society meets tonight, and we have a speaker from the State Department of Health, who will talk to us on such subjects as prenatal care, child hygiene, free clinics, school clinics, and other topics relative to the State's activities in health. How many of us will be able to listen with enthusiasm?

E. L. Wurtzer, M.D.

## Certificate

TO THE EDITOR: The editorial in September MEDICAL ECONOMICS, describing the New Jersey action in adopting a certificate of specialism, appears to me to be unusually timely. Of all the reforms now needed in medicine, appropriate recognition of the real specialist would seem to be outstanding. At present almost every man we meet seems to be a "specialist."

With state and county societies taking constructive action on this matter, the next step should be for the A.M.A. to issue a specialist's certificate. When will that come to pass?

If at present I pose as a specialist, I have no means of convincing the public except by word of mouth advertising. Patients come to my office and see nothing unusual in the way of certificates, and my chiro competitor across the street who is well schooled in practical salesmanship can call himself a specialist with as much conviction as can I.

Why not a creditable certificate, by the national organization?

Sylvester Doggett, M.D.

## Sages

TO THE EDITOR: Why don't we hear from the medical sages on this subject of "Newcomers in Surgery"? The question I recently propounded in MEDICAL ECONOMICS was "What do the younger M.D.'s have a right to expect from their older brothers in the profession?"

Specifically, haven't we a right to do surgery of a limited sort, or must we confine our practice to medicine exclusively?

In August MEDICAL ECONOMICS

Doctor N. S. Giardina replied: "You are certainly fortunate in being allowed to confine yourself to medicine. In some localities, newcomers are lucky to do general practice without the local academy eyeing them with not much pleasure."

This is all very well, but the older men are strangely quiet on this subject. I realize that one should not rush blindly into surgery without an adequate background of training. I was not referring to that type of individual. I referred to the young physician who has had several years of real hospital experience, both in medicine and surgery, knows what he is sufficiently capable of doing in surgery, and also recognizes his present limitations. Should he not be allowed to practice his profession without unwarranted criticism from the older men?

I am well aware of the fact that a correct surgical diagnosis is important, and not always easy to make. It is also true that making a correct diagnosis in a medical ailment is just as important and many times just as difficult.

After all the whole subject harps back to the long recognized fact that jealousy exists in the profession to an unfortunate extent. I don't begrudge the practice that the senior members of the profession enjoy, because I know they are realizing the fruits of their efforts after many years of hard work.

It is simply that I do not consider it ethical for the physician who is well established in practice, to belittle the work of the younger man who is making an honest, and oftentimes too ethical effort to build up a practice of his own—both in medicine and surgery.

L. W., M.D.

## Home

TO THE EDITOR: I have been following your report of opinions concerning changes in the types of our hospitals. I, personally, have made a peculiar observation. In the last twenty years I have been called to treat many fellow-physicians, and it is surprising what a large proportion prefer to be cared for at home. This holds true even in the most serious illnesses. They will even segregate a portion of their home in cases of contagious disease, in preference to hospitalization.

If this is the sincere feeling of a predominating number of doctors, why do they send their patients to hospitals so readily?

Siegfried Block, M.D.

## Busy

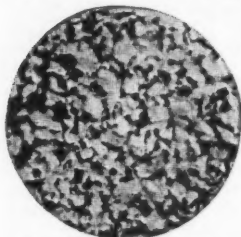
TO THE EDITOR: I wish that the ideas expressed in MEDICAL ECONOMICS might result in a real economic organization of physicians. We are all so busy with our own affairs that we are un-

[TURN TO PAGE 111]

# Casein and fat in infant feeding

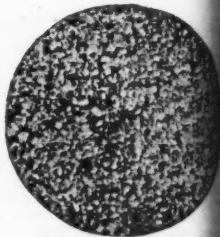
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AND ADDED CARBOHYDRATE

LACTOGEN  
FORMULA



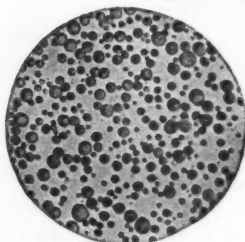
Dense and cheese-like

CURDS  
Equal  
magnifications  
to  
1 1/4 actual size



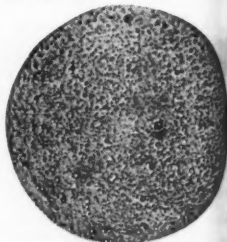
Fine, light and flaky

[Curd precipitated completely at 98° F. by  
gradual addition of dilute hydrochloric acid.]

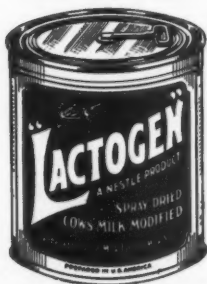


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# MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

## Why Not Talk Business?

By A CLINIC MANAGER

THE other day, while returning from a medical convention by train, I was fortunate enough to fall into prolonged conversation with a physician whose story gave me the idea for this article.

He was a general practitioner; I was a layman whose work involves the handling of patients in a business-like, yet diplomatic manner.

Our occupations, therefore, put us immediately on common ground.

"A thing that has bothered me spasmodically for going on fifteen years," said my doctor-acquaintance, "is how to cut down losses on account of patients who never meant to pay me in the beginning, if they could help it.

"Those losses—taken together with the money owed me by patients who have good intentions, but simply postpone paying their doctor's bills until I give up trying to collect them—would probably buy me a good-sized annuity on which I could retire in another fifteen years.

"As it is, I have about decided to become hard-boiled, and to make the next fifteen years pay me the income I know I deserve. I don't mind doing my fair portion of charity work, but I feel that I have been imposed upon

by many hundreds of patients who can well afford to pay for my services.

*"What distresses me particularly at the moment is that conditions seem to be getting worse.*

"Before the depression, physicians used to say that the public's habit of tying up wages a year or two in advance by purchasing radios, automobiles, and washing machines, on the installment plan—was the cause of collection difficulties.

"Today, this insidious practice is supposed to have subsided. Those who have employment, it is said, are more frugal; and I have read on several occasions that the credit situation has improved.

"But I don't find it that way in my practice. Those of my patients who are unemployed have a ready excuse at hand; they haven't the money, and don't know when they will have it. And too many of those who are employed apparently don't see why they should trouble themselves to be prompt. They hear depression and slow-pay on all sides until slow-pay becomes a habit with them, too. *They no longer consider it a disgrace to owe money.*

"Meanwhile, the picture of my Accounts Receivable gives me a sinking feeling whenever I dare

look at it. One of these days I am going to start being really hard-boiled."

I have related this conversation in detail, as nearly as I can remember it, because I believe it represents the thoughts in the minds of many thousands of physicians, both specialists and general practitioners, all over the United States today.

Before I left the train, I assured my fellow-traveler that it was not necessary for him to become hard-boiled. I was able to assure him of this from my own experience, for I knew only too well the problems which were distressing him. I also knew that I had devoted a great many late hours in my office, and even sleepless nights at home, to solving these problems.

In my capacity as manager for a group of earnest professional men who do not want to be confused by business details, I make personal contact with every new patient coming to the group. This contact usually takes place *before* the patient sees the doctor. If it is an emergency case, the patient receives full attention, regardless of his ability or inclination to pay. That is part of our obligation toward society. But I invariably make a tactful effort to collect the bill.

In all cases, the contact is far from being hard-boiled. We are selling the patient on the value of the clinic's service at every step, inspiring his confidence, giving him every scientific benefit of modern medicine, making him feel that he is among friends. *But we insist upon being paid.* We insist upon being paid with reasonable promptness, unless an understanding is reached in advance that the case is to be charity, or semi-charity.

Perhaps the biggest principle that guides us in cases of doubtful credit standing is reaching an understanding *in advance*. I believe thoroughly in the wisdom

of talking frankly but tactfully with the patient concerning costs. In all my experience, I have found that the patient respects this attitude. I have found that most patients will meet you halfway if you give them the opportunity. Sometimes it is necessary to encourage them, but if handled properly, they will respond voluntarily.

Of course, in clinic work, the first interview does not usually clear up the business details, for the reason that necessary treatment is seldom known in advance. This calls for later business interviews, often several of them. But I do learn all I can concerning the patient's financial integrity at the first contact.

I have before me now a group of patient cards, selected at random from my files. Many of them are typical of the problems my fellow-traveler related.

There are scarcely two cases in the lot exactly alike from a financial standpoint. I find, however, that I can group them into five classifications:

1. Those whose credit standing is beyond question.
2. Those who will pay eventually, without undue pressure. They are sure but slow.
3. Those whose intentions are honest, but whose ability to pay is impaired by unemployment or other adverse circumstances.

"I am convinced that three-fourths of the credit losses of the average doctor could be avoided if either he or his secretary would exercise care in getting complete and accurate information about the patient at the time of the first interview, and would study the peculiarities of each case, adopting an appropriate attitude in dealing with it."

4. Those who will avoid payment until definitely forced.
5. The deadbeats.

The first class may happily be eliminated as a source of collection headaches for the physician. Typical of this class is Mrs. A, the wife of a local hardware merchant. She is prominent in civic and social affairs; hers is one of the oldest family names in the city. Any store in town would be glad to deliver an almost unlimited amount of goods to her home, on an hour's notice.

Many physicians have practices which consist, in large part, of such patients, but there are also many physicians who are not so fortunate, who serve a transient population, who are subject to the flux of activity of an industrial community, or whose collections are dependent upon the success of the grain crop.

Whatever the proportion of known sure-pay patients in a doctor's practice, they are real cause for thankfulness.

Typical of the second class (those who are sure but slow) is Mr. B, sales manager in a large shoe company. Like Mrs. A, he is well-known socially. Unlike Mrs. A, however, his credit record is somewhat unsatisfactory. This fact comes to light after his first visit to the clinic, by means of a report from the local credit bu-

reau, revealing slow-pay notations by several local stores, as well as by two former physicians.

Being permanently employed, at a very respectable salary, this patient is a good credit risk, even though his bill-paying habits are careless.

A series of treatments covering several weeks is indicated in Mr. B's case. At the first opportunity I ask Mr. B, "I should like to note on the business office records how you wish to handle this account."

Mr. B indicates that he wants to be billed.

"Very well, a statement will be rendered you at the end of each month covering treatment to date."

This has the affect of implanting on the patient's mind the suggestion that services are rendered on a business-like basis. It is seldom necessary to say more. Many physicians in individual practice would refrain from asking even the simple question quoted here. That is a matter of discrimination. It is not worthwhile to risk offending such a patient by appearing over-anxious or doubtful about his ability to pay.

Regardless of what conversation takes place concerning payment, make sure that your second statement, if the first statement has not been paid within thirty days, bears a reminder. And under no circumstances should two statements be allowed to go by without talking with the patient, if he is still under treatment at the time.

Under that circumstance, I would broach the subject in this way:

"Mr. B, when you first became a patient here, we agreed to handle your account by sending you a bill monthly. No payment has been made on the first two statements, and I am wondering if you wish to leave a payment on account at this time."

Gentle reminders of this sort will serve to keep Mr. B conscious of the fact [TURN TO PAGE 117]



# How to Incorporate



Group practice offers three important sets of advantages: (a) better service through pooling of equipment and specialized knowledge; (b) economies in overhead and operating expense; (c) accordance with the trend of the times, and the public's leaning toward institutionalized medicine.

The particular advantage of group practice under the corporate form is that members of the group may be relieved from personal liability.

On the basis of these arguments, this article proceeds to discuss the practical aspects of organizing the corporation. The author is a physician-lawyer, whose book "Medical Jurisprudence" is well known. The details of organizing such a group, of course, must necessarily be worked out in consultation with a local attorney, and according to local conditions.

# tea Group

By CARL SCHEFFEL, M.D., LL.B.

**C**ORES of communities through the Central West now harbor private group clinics; and the idea is spreading to the four corners of the United States.

In these communities, doctors have had the vision and courage to seize the group idea firmly, to combine their knowledge and resources, form corporations, and furnish what the public is being educated to recognize as superior service.

The advantages of practicing as a group under the corporate form are divided into three distinct classes: professional, economic, and psychological.

Any up-to-date physician will admit that present-day practice, conscientiously carried out according to modern scientific standards, demands more equipment and greater knowledge than the average practitioner working in single harness has at his disposal.

The professional advantage of group practice is, therefore, the increased efficiency resulting from the pooling of equipment, resources, and man-power. The members may divide their professional activities according to their interests, and so render services representing the product of composite minds rather than of a single professional mind.

From the economic standpoint, an outstanding advantage of the corporate form of group practice is that it eliminates the personal responsibility of the physician for alleged acts of negligence.

If anyone alleges negligence arising out of professional services rendered, the aggrieved patient must seek redress from the

corporation and in the name of the corporation. The physicians' names and reputations are spared, and their worldly goods other than shares in the corporation, need not as a rule be placed in jeopardy.

The other and more obvious economic advantage is the saving in overhead. It is clear that when five physicians rent five waiting rooms, employ five secretaries, keep five sets of books, duplicate laboratory space and equipment five times, they are spending their resources far less efficiently than when they organize a corporation, hire themselves out as employees or servants, or act as agents for the corporation, and share all this overhead.

The psychological advantage has been already referred to; it is the effect upon a modern-minded public, which is rapidly coming to a widespread acceptance of institutionalized medicine. The trend is unmistakable; it behooves the private medical profession to study means for keeping in step with the trend.

In previous articles I have discussed the legal side of corporate medicine, and have shown how institutions like the Mayo Clinic, the Battle Creek Sanitarium, and a host of lesser known corporations, function without violating the medical practice laws of their State.

Any corporation has the legal right to engage licensed physicians to act as its employees, as its servants, or as agents acting in its behalf. The corporation merely fur- [TURN TO PAGE 125]

# Fountainhead

## PRE-MEDICAL COURSES ARE MORE POPULAR THAN EVER

**A**MONG that portion of the medical profession which has had from two months upwards of actual experience in private practice, an overwhelming opinion exists that medicine is becoming a field overcrowded. From the laity, particularly in rural sections, come frequent complaints that there are too few physicians!

The statistics show that the ratio of physicians to population is greater in the United States (1 to 800) than in any other nation of the world. The U. S. Office of Education reports that "the number of doctors is not increasing as rapidly as population"—and then makes the guess that "the number of doctors in the United States will probably decrease until about 1945, at which time an upward trend will begin."

Statistical efforts to prove or disprove overcrowding in the medical profession are somewhat nullified by three things:

1. Public health trends;
2. Changing methods of practice;
3. Increasing centralization of medical service.

These three variables are enough to throw the best computations out of gear.

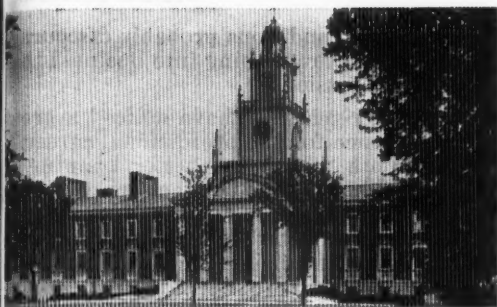
In the light of this, it is interesting, if not decisive, to see how the younger generation is heading in its choice of medicine as a career. Is the ambition toward professionalism being increased or diminished? Going back beyond internship, beyond medical school, to the very fountainhead of medical manpower—the academic college—what reaction is found?

MEDICAL ECONOMICS has inquired among fifty representative American academic colleges, and finds a decidedly optimistic attitude toward the career of medicine.

Listen to these significant statements by deans:

University of  
Pennsylvania

"No profession has claimed a larger number of our 1932 graduates than medicine.



There does seem to be a growing preference for professional work over the business career. This is largely because of the belief in greater financial security in the professional line. . . In the future the professions claiming the greater number of students will be medicine, law, journalism, and teaching."

Pennsylvania  
State College

"The number of our pre-medical students has increased in the past ten years from about one quarter of the graduates of this school to about one half."

New York  
University

"We have every reason to believe that the pre-medical course will continue to claim more students than any other pre-professional course."

Cornell  
University

"Probably no other profession at present has so many representatives among our undergraduates as medicine; though it is possible that more will eventually go into teaching than become physicians. Teaching, medicine, and law—in that order—have in recent years been the choices of most of our entering freshmen. . . The economic depression has turned a good many students from businesses which would in good times attract them."

Columbia  
University

"It has been our experience that there is a growing preference for the professional over the business career." [TURN THE PAGE]



University of  
Washington

"Economic conditions probably discourage more students from going into business than into the professions."

Purdue  
University

"In recent years we have noticed a growing preference for the professional career. . . We attribute this to the better training of students, which opens to them many professional positions which formerly would have been difficult to enter. . . It is highly probable that teaching, medicine, and laboratory employment will each year take a greater number than the preceding year."

Other college deans, in less explicit language, indicated a similar tendency.

But there are a few who tell an opposite story:

Ohio State  
University

"We have noticed a considerable decline recently among the students in this college who are desiring medical training. . . We attribute this decline to the fact that the profession is becoming more and more crowded and the students want to get as broad an education as possible, so that they may adapt themselves to whatever conditions they are forced to meet."

Tulane  
University

"Our general impression is that an increasing number of graduates of the College of Arts and Sciences enter upon a business career. Two explanations occur to us—the increasing difficulty and added time of preparation for study of medicine and of law, and the opinion that the professions are overcrowded."

University of  
Colorado

"Many who *think* they want to study medicine will soon change their course."

Figures supplied by the fifty colleges queried in this survey, show that the average number of undergraduates in academic colleges announcing their intention to enter medicine is approximately 16%.

One college reports the number to be as high as 51%; another reports only 2%. The commonest range is between 10 and 30%.

Among the professions, medicine ranks a decisive first in popularity.

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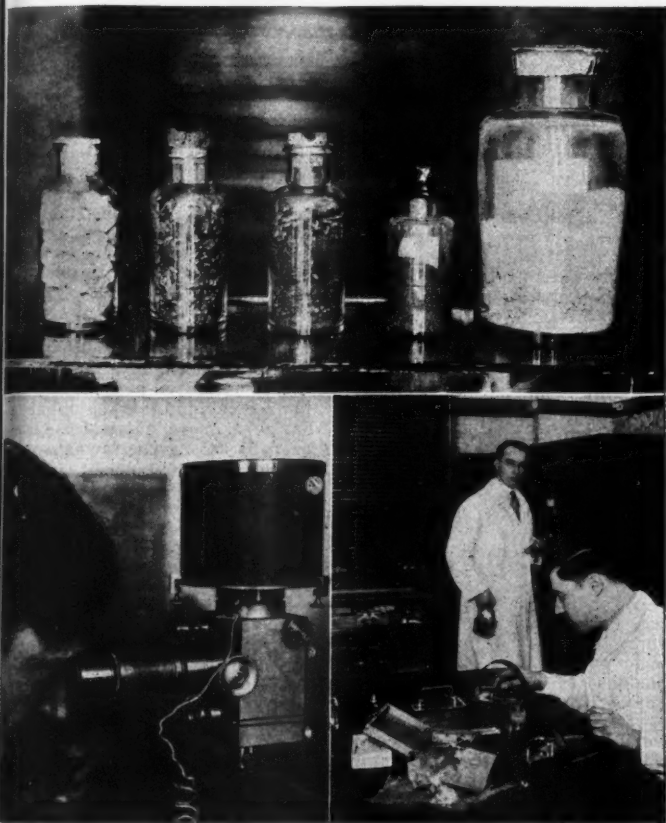
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# One Gram: \$60,000



Whatever the depression has done to the prices of most commodities, it has made little difference in the price of a milligram of radium. These photographs show three interesting phases in the radium industry. (Top photo) The first four bottles contain radium-bearing earth; 10,000 kilograms of earth are used for making one gram of radium. The fifth bottle shows how the radium-earth is shipped from the quarry. (Bottom, left) Measuring radium electrically. (Bottom, right) Packing radium for shipment.

# Without Benefit of Ca

## MORE THAN ONE WAY TO PAY A DO

**M***MEDICAL services in exchange for potatoes, for welding, auto parts, day labor, or what have you.*

If it were ethical for physicians to solicit patients, that is the sort of advertisement some of us would run. At least, that submerged contingent of us who practice general medicine in the country.

I have scant idea how the physician in the large city has managed to make ends meet through the depression. As for ourselves, out here in the wilds, we are still eating and still solvent; and we are managing to extract a bit of amusement from the peculiar methods whereby we bring home the bacon.

The latter may be taken literally, not only as concerns the bacon, but also the flour, the butter, the clothing, and what need you. The first requisite a doctor must possess in these more than parlous times, is a sense of humor; the second, the courage to face the music. Possibly I should say that these two are so intertwined that there is really no separating them.

Practicing medicine in a community where money is becoming an ever scarcer commodity does not make our plight the easier. But the will to live and to serve are ever present, and a bit of ingenuity can make the process tolerable, if not exactly pleasant.

In the depression of 1921, we had our preliminary experience with barter and exchange, but what we did then was simple by comparison with what we have

been compelled to face in 1931-32. A decade ago, we exchanged a tonsillectomy for ten bushels of potatoes and fifteen chickens, and called it square. A confinement brought in a few added chickens plus the potatoes, and so on down the line to where a bushel of apples was given in exchange for treating Johnny's stomach-ache, probably caused by eating said apples in their unripe state.

Today, however, with much less actual cash in circulation in our community—every mine and lumber camp in this region is shut down—a more intricate system prevails among the townspeople.

John Jones, a patient, whom I have known as an honest man for many a long year, has a small son in need of a tonsillectomy, but he has no money with which to pay for the operation. Formerly, Mr. Jones worked for the railroad and received good pay. With some of it he bought a quarter section of stumpage and is cutting wood and tilling his clearing. He has wood he could bring me, if his truck were in such condition that he could deliver it. Alas, the old Ford wheezed and sputtered and curled up one day a week before and Jones has no money to repair it and no other means of transporting his wood.

What to do? His face shows despair. Not only is my bill dependent on his bringing wood to town, but what little he has been able to provide for his family with the money earned by the sale of this commodity, is no longer within reach. The season is early and his farm is not yield-

# of Cash

## DOCTOR

By A MICHIGAN  
PHYSICIAN

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ing produce. I am sorry for the man. I volunteer to wait for my pay indefinitely, but that only hardens his pride.

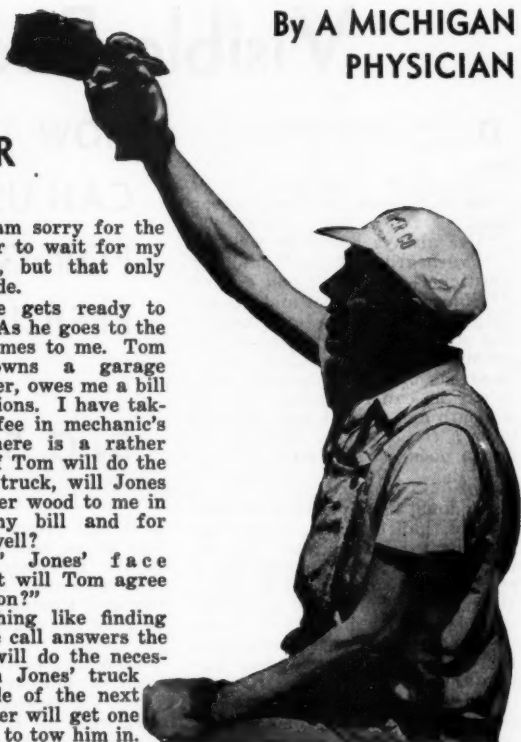
Dejectedly, he gets ready to leave the office. As he goes to the door, an idea comes to me. Tom Smith, who owns a garage around the corner, owes me a bill of some proportions. I have taken part of my fee in mechanic's services, but there is a rather large balance. If Tom will do the work on Jones' truck, will Jones promise to deliver wood to me in payment for my bill and for Tom's work as well?

"Sure, Doc!" Jones' face brightens. "But will Tom agree to the proposition?"

There is nothing like finding out. A telephone call answers the question. Tom will do the necessary repairs on Jones' truck about the middle of the next week, if the latter will get one of his neighbors to tow him in. The job will cost about fifteen dollars. Jones agrees that the charge is not excessive and an agreement is reached that satisfies Tom and Jones and myself. Tom works off part of his debt to me during a dull time; Jones has his truck put into useable condition, which enables him to make enough to tide him along; and I get a part of my supply of wood for winter burning. That wood will represent just so much cash to me later on.

I then agree to defer the wood payments for a while, because I am not in need of the fuel; the operation is performed and we are all content.

The John Jones incident is not unique. [TURN TO PAGE 139]



"Bill Foster was a painter whose time was by no means wholly occupied. He had fallen off a scaffold a year before, and had been a patient of mine for three months afterward. When he came to me and offered to give my house the coat of paint it needed, did I accept? I certainly did, without any hesitation whatsoever.

"He is satisfied with the bargain, and so, for that matter, am I."

# Visible Records

"DO you know Doctor C?" a friend asked me the other day.

"Certainly," I replied.

"Is he a good nose and throat man?"

"I've always heard he was."

"I've heard that too," said my questioner, "*but don't you believe it!* Since my first visit and examination, I've seen Doctor C twice; and still he has no record of his examination of me. After seeing hundreds of noses, do you mean to say he can remember mine of a month ago, a week ago, or even today? *He can not!* I'm out to find a *good, careful* doctor."

No doubt most patients are less critical than this one, in passing judgment on physicians who do not keep records. Be that as it may, few will deny that the physician who maintains complete records insures himself in large measure against excessive collection losses and dissatisfied patients.

The number of different record forms is legion, but for the man who conducts an active, good-sized practice, the *visible record system* offered by several large manufacturers is unexcelled.

Better informed users of the visible system employ three distinct records:

1. Case history.
2. Treatment.
3. Ledger.

These may be kept on three or more separate cards, filed together, or on a single folding card, each face bearing a different record. (See illustrations on pages 24 and 25.)

A combination of the case history, treatment, and ledger records, as described, enables the physician to review his patient's

HOW THE M.D.  
CAN USE THEM  
FOR GREATER  
EFFICIENCY...

By G. S. Dunkirk

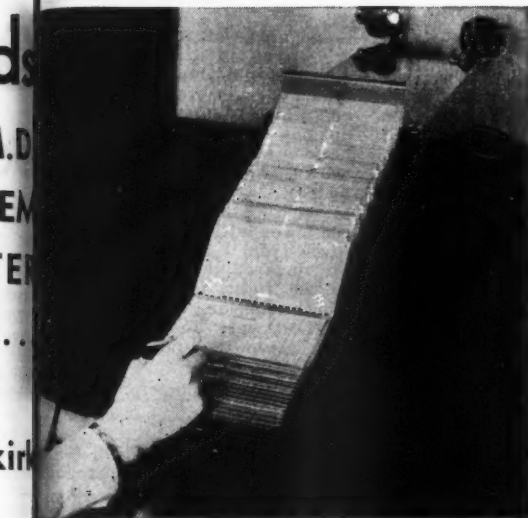
past and present physical condition as he issues monthly statements. It eliminates the annoyance and time lost in maintaining and looking up records kept in different places and in different forms.

Combined cards are also handy when withdrawals must be made from the active file. Only one card need be taken out, instead of two or more.

When a patient comes in for consultation, this unified filing system enables the physician to secure at a moment's notice the three records in one.

It is quite surprising to observe how patients eagerly watch their records as they are being referred to. Looking at their histories, and chancing to observe, on the ledger card above the history, figures that indicate a growing account, patients will be inclined to make payments in order to keep the account down.

Here is the procedure followed in the actual use of the visible record system:



date is arranged in the presence of the patient.

Laboratory procedures are ordered in a similar way, when these are necessary.

Before the patient goes out the doctor makes a record of treatment on the treatment section. He then hands the card to his

The patient calls at the doctor's office, sits down in the waiting room. He is approached by the secretary, who secures his name and tells him the doctor will see him shortly. The assistant then goes to the visible record file and removes the patient's card. If there is no card there, she makes out a new one. In either case, it is placed on the doctor's desk as the preceding patient leaves.

The patient in the waiting room is then ushered into the consultation room, where he describes his ailments. If he has been called before, the doctor reviews his history card, noting past illnesses, operations, diagnoses, and physical examination data. If, on the other hand, the patient is new, his history is noted on the card for the first time.

An examination follows, then a diagnosis, after which the doctor gives or prescribes the necessary treatment. Perhaps an X-ray by one of the physician's colleagues is suggested. If so, the

secretary in the waiting room, who, before the patient leaves, obtains any further information required, such as his occupation, who referred him to the doctor, etc.

All cards removed for consultation are kept on the secretary's desk until the end of the day. Before replacing them in the file, she makes sure they are accurate, and that all necessary data have been entered. She may attach a colored signal at this time, to indicate a follow-up call for the patient, or the next billing date. Cards are then filed in alphabetical order.

When making outside calls to hospitals and to the homes of patients, the physician takes with him, if he thinks it necessary, the corresponding record cards. He also takes one or two blank cards to be filled out for new patients.

At this point, you who are reading this article may be prompted to ask: "Yes, the plan





# The Better to

**T**HE addresses of welcome which were heard last month by the entering classes of seventy-six Class A Medical Schools in the United States, were undoubtedly charged with inspiration of a beautiful sort. Just 720 years ago, stirred by similar words of fervor and idealism, 50,000 unarmed children placed all their trust in God and set forth to recover the Holy Sepulcher; a few lived to return home.

This is not to bewail the fact that our medical deans and professors refrain from dwelling upon the struggles that lie ahead of the young doctor, struggles for which his four years of academic preparation and four years of technical preparation leave him only half-prepared. I am not for one moment suggesting that we greet our newcomers with long faces and pessimistic platitudes. But I think it would be a fine idea if the rhetoric of welcome were followed at the earliest possible moment with some practical lectures on the business phases of medicine.

Medicine is not a business, but a noble profession. It is an idealistic profession. Its essence is to serve. Profit is not its objective. Obvious truths, all of these.

It is equally obvious that a young idealist, floundering in problems which he thought were self-solving, is not a good physician, no matter how excellent his technical background.

About half a dozen medical schools in the United States today give their men economic training. Even in these pitifully few cases, the training is usually far too brief and sketchy. Most schools are, or pretend to be, horrified at the idea of teaching the young physician how to handle the business conduct of his practice.

They have stubbornly opposed all sugges-



# Enjoy Ideals

tions in this direction, evidently on the fantastic theory that candidates for the medical degree would become commercially minded, and have gone to an extreme of idealism in keeping the student unsullied by contact with subjects like record-keeping, public speaking, and the professional attitude.

•

The consequence is that the first five years after graduation represent a serious dilemma for all except these few exceptions: (a) those who fall into salaried positions; (b) sons of successful physicians; (c) those who have a natural bent for business success.

This is not as it should be.

The old preceptor system of training physicians at least had the advantage of being concrete, as far as it went. It gave a man a few definite ideas on how to meet situations that now cause many a three-year interne to lose sleep nights. The man who was graduated from that School of Experience had ideals, but he was able to enjoy them more thoroughly because his feet were on the ground.

A few courses patterned after that system, added to the curricula of the Class A Medical Schools, would go a long way toward preserving intact the ideals and teachings for which every physician pays upward of \$20,000. He will be a happier craftsman, his public will be better satisfied, and there may be an advantage or two on the side of the doctor's own family.

The rhetoric by which these youngsters are greeted in September, 1932, and sent forth in June, 1936, will ring with more sincerity when this reform is made.

*H. Sherridan Baker*

# He Knew When

## A THOUGHT

**T**HE patient leaned his elbow on the consultation desk—and talked. As he talked, the strained lines in his forehead gradually relaxed.

His physician did not interrupt him. He did not toy with the inkstand, nor rock nervously in his chair, nor pluck at his necktie—nor otherwise indicate impatience. He knew that his patient was the chronic-worrier type, and that he would go on talking, often repeating himself, for another half-hour, at least.

But he also knew that this would be time well-spent. He recognized it as his task as a physician to prompt the patient in the unloading of those worries, and as they spilled forth in rivers of conversation, to soak them up as a sponge absorbs water. This, he knew, apart from any advice he might or could render, would give the patient relief.

*The doctor knew when to listen.*

•  
“Don’t worry!” How many physicians have spoken these words to patients?

It is the one grand, general piece of advice. But it is a most futile piece of advice, unless immediately followed up by some constructive suggestion, something to take the place of this worry which we are advising the sufferer to lay aside.

In the thinking processes nature is as intolerant of a vacuum as she is in the physical realm. Every one who worries would like to be rid of the oppressiveness, the deadly Something, which steals over him at times, robs him of his peace of mind, inhibits all

reasoning power, and leaves him (poor wretch) fit prey to hosts of invading demons.

“I worry so,” the patient will say.

“Ah, but you must not,” the physician replies. “You will never get well unless you stop it. It is something you must do for yourself. I cannot do it for you.”

And then, for parting advice, he will call back a reminder: “Remember, no worrying.” And the troubled patient returns to his anxious state, worrying miserably just what to do about it all.

It makes one think of some puzzle game. No matter where you begin, in which direction you turn, you are always at the starting point.

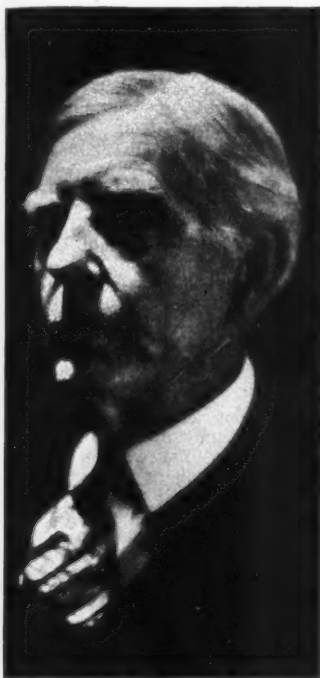
Worry. The dictionary gives us scant definition for the word. A state of anxiety. Then we go a little farther and look up anxiety, and most likely will find that it is just another definition for worry. A strained condition of the mind. Undoubtedly we will have to make our own definition, based upon experience. Suppose we say, then, that worry is the mental phenomenon attending a sick—not necessarily impaired—mind. Still not exactly lucid, but at least something with which to work.

It is just as reasonable to tell a patient he must not have appendicitis as to tell him he must not worry. If he could do that he would at once reason himself out of the whole distressing situation. The worrying patient must be taught how to replace his bad thoughts with good ones. That really sums up the situation.

The brain of the worrying patient has been bombarded time and again with adverse sugges-

# to Listen

FOR THE G. P. • By C. C. Sterling, M. D.



tions, until his mental mass is so compact that he cannot, unaided, move one layer of inhibited thought. The load becomes heavier and heavier, and at last becomes such an intolerable burden that the sufferer seeks relief, often by the extreme route of suicide; or what is almost as bad, he drifts into a settled melancholia. Clearly, he is not in condition to cure his own mental state. He needs help and the thing for us to do is to determine the proper, logical person to administer the cure.

Who can help him lift, layer by layer, this mass of woe and apprehension which has settled upon him? Interested friends attempt it and, to our surprise, sometimes succeed. These cures are accidental. There is no method back of them, and the healers could not tell us by what means the cure was effected. Relatives seek the aid of priest or minister, hoping that prayer will relieve the sufferer of his melancholy thoughts. But this merely adds to his mental burden, for the patient at once thinks that he must, indeed, be in an extreme state to require such services. He feels sure he is being prepared for the end.

"By listening with an ear which has never heard the old story, the tale assumes a new interest, and the patient at once responds to the note of interest in our voice... in the voice of the only human being in whom he has confidence.

"It is a tedious process, but a simple one."

Some believe that the worrying patient should be disciplined. Yes, but not according to *that* meaning of the word. Trained, is better. Educated. Taught to know what has brought about his condition and what will relieve it. Perhaps the poorest method of attempting a cure, is that by which the patient's worried state is entirely ignored, or he is scolded or ridiculed.

[TURN TO PAGE 81]

# The Doctor and His

## SPECULATING ON

**E**VERY day chalked off the calendar from now on will witness the reinfection of thousands by the virus of stock market speculation.

The opportune time for buying stocks is not yet at hand, but it soon will be. Before it arrives, readers of **MEDICAL ECONOMICS** will do well to observe one large **DON'T**.

*Don't buy on margin.*

In exceptional instances where the physician has ample means and wishes to make purchases on strictly conservative margin, he may be justified in doing so. But for the man who cannot fully protect his stocks, and do it at a moment's notice if necessary, marginal buying represents the height of folly.

It should be clearly understood that, while this practice of purchasing on margin enlarges the possibility of profit, it enlarges to an even greater extent the possibility of failure.

No stock transaction is justifiable unless the investor is capable of withstanding a percentage of loss equal to that of anticipated gain. He assumes an uneconomic degree of risk when he overexpands his capital (cash or credit) by purchasing on margin.

To illustrate, let us consider the situation of a physician who buys outright in five or ten share lots. He naturally holds a more modest line of securities than if he had bought on margin. Still, in the event of a sudden, devastating drop in the market, caused perhaps by a "bear" attack, he will be repaid by finding, when

the smoke has cleared, that he still possesses his shares intact. They may have receded in price, but they will quite likely recover.

The plight of the marginal buyer, confronted by the same chain of circumstances, is a far sadder story. If the market slumps, he is obliged to put up more money. Should he be unable to provide it, his stock is sold, the loss often wiping out his entire equity.

"But isn't it possible to make money playing the market on margin?" one often hears. The answer is yes, *in about one instance out of a hundred.*

It seems easy—this idea of making money by buying stocks on margin. Yet why is it that countless numbers have tried it with such dismal results? Why is it that some brokers have to get a new set of margin clients practically every two years?

Here are the reasons:

The marginal trader is not a

"The hardest part of the marginal trader's lot is found in the constant conflict that goes on between his judgment and his impulses. Seldom, if ever, is he right in both at the same time... Buying stocks on margin often means financial suicide. For the professional man of moderate means there is only one way to buy. **BUY OUTRIGHT.**"

# Investments

MARGIN • By WILLIAM ALAN RICHARDSON

security buyer. He may believe he is, but a little thought will reveal his error. Quite often, he is scarcely more than a gambler, using stocks as he would chips in a poker game.

He is gambling against the market with the stocks he carries. If he wins, which he sometimes does, he usually buys more chips and plays for higher stakes.

If he loses, which is the rule rather than the exception, particularly over a long period of time, his principal shrinks, and he is forced to put up additional margin or reduce his holdings.

It seems to be a rule among marginal speculators to load themselves with stocks as heavily as they can on the amount of money they have available. To these traders, the prospect of calls for more margin often becomes a haunting phobia. These calls usually come at a time when it is inconvenient to meet them, and the speculator is forever on tenterhooks wondering when his principal will be wiped out.

He knows that he is at the mercy of day-to-day market fluctuations. He knows that he must scan the papers or the ticker zealously to get the latest quotations. And, what is still more inexplicable, he often realizes that the time and energy he could be using to better advantage in his profession are being frittered away, watching and worrying over market moves. Still he persists.

If money could be made consistently in marginal trading, it might be worthwhile. But no marginal trader, if he is candid, will assert that it compensates for the strain and anxiety involved.

What is the marginal speculator's biggest handicap?

It is his own mental attitude.

In his wish to make as much money as possible on as little capital as required, he is always torn between two doubts: whether he should take an immediate small profit or wait for a larger one; whether he should take an immediate small loss or trust it will be recouped.

If he watches the tape, he usually becomes a victim of what is known as ticker psychology. That is, he is stampeded into buying on rallies and frightened into selling out on reactions. Too often he blames the broker for mistakes he himself has made.

Finally, after trying a variety of systems and finding that none of them runs true to form, he succumbs, harboring the conviction that there is no way to beat the market. He is both right and



wrong. He may not be able to beat the market by marginal trading; but, if he knew it, he could make money by buying securities outright and with intelligence.

The oil on the pyre of the marginal buyer's funeral is often poured by his own broker. The speculator who relies wholly on the advice of his broker is headed for a rapid burning up.

Naturally the broker's first thought is his commission. It is his business to encourage trading to the fullest extent, to get as many of his clients in and out of stocks as fast as possible. The more they trade, the greater his

receipts. The thinner his customers spread their margins, the more stocks they can carry.

All of which means an increase in the toll the broker takes.

No more than this can be expected. The broker makes his living by turning over his customers' capital. This naturally is his first consideration. He can not offer disinterested advice and operate in the sole behalf of his clients. No one should expect him to. When this is realized, buying will be less indiscriminate and less frequently on margin.

Events in the past three years have shown that there is involved in marginal accounts a dual risk. First, there is the possibility of

## Investment Guide for October

The doctor with about \$5,000 to invest may safely hold:



40% in U. S. Government bonds; 20% in State and municipal bonds; 20% in underlying first mortgage bonds of public utility (phone, gas, light) operating companies; 10% in guaranteed first mortgage certificates on improved urban real estate; the remainder in building and loan shares.

The doctor with about \$20,000 to invest may safely hold:



40% in U. S. Government bonds; 25% in tax-exempt State and municipal bonds; 13% in underlying first mortgage bonds of public utility (phone, gas, light) operating companies; 10% in industrial bonds of chain-store, food, and cigarette companies; 8% in guaranteed first mortgage certificates on improved urban real estate; the remainder in building and loan shares.

The doctor with about \$80,000 to invest may safely hold:



45% in U. S. Government bonds; 30% in tax-exempt State and municipal bonds; 8% in underlying first mortgage bonds of public utility (phone, gas, light) operating companies; 6% in industrial bonds of chain-store, food, and cigarette companies; 7% in guaranteed first mortgages on improved urban real estate; the remainder in building and loan shares.

FOR FURTHER DISCUSSION OF CURRENT INVESTMENT POLICY, TURN TO PAGE 75

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\*Journal

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# Vitamins should be prescribed in a group

THE more medical science discovers about the value and functions of vitamins as they affect the health and well-being of the human race, the more vital these mysterious elements become. In an address given before the Medical Association of Georgia, at its Eighty-third annual session held at Savannah, Ga., from May 17 to 20, 1932, Dr. D. H. Garrison, of Tate, Ga., said: \*



"Study of vitamins from a physiologic and therapeutic standpoint has led to the conclusion that the human system cannot survive without the proper intake of vitamins and that it is as important to have a balanced intake of vitamins as it is to have a balanced intake of food supply. No one vitamin, prescribed alone, can give the proper results, but *vitamins must be prescribed in a group*, or at least the *mater Vitamin A* should be prescribed with any other vitamin in order to obtain the proper results."

This confirms the growing conviction that the prescription of any one particular vitamin in excess is more harmful than beneficial, while, as Dr. Garrison suggests, intake of a sufficiency

of the several vitamins is decidedly beneficial.

Maltine With Cod Liver Oil is widely used because of its known and guaranteed vitamin content. Seventy per cent is

Maltine, a concentrated extract of the nourishing elements of malted barley, wheat and oats—rich in Vitamins B and G. The remainder is pure, vitamin-tested cod liver oil which supplies Vitamins A and D. Taken with orange or tomato juice a fifth vitamin—C, is added. Experience has demonstrated the value of Maltine With Cod Liver Oil in the treatment of metabolisms disturbed by insufficient diet and lack of vitamins.

Maltine With Cod Liver Oil is biologically standardized and guaranteed to contain four vitamins, A, B (b<sub>1</sub>), G (b<sub>2</sub>) and D. Biological report on request. The Maltine Company, Est. 1875, 30 Vesey Street, New York, N. Y.

**Maltine**  
WITH COD  
LIVER OIL



\*Journal of the A.M.A. Vol. 98, No. 25, Page 2238

★ SEE Certificates ADVERTISEMENT ON PAGE 70 ★



a sudden nose-dive in the market, severe enough to wipe out equities completely. In addition, there is the risk entailed in dealing with uncertain brokerage houses. Many firms accustomed to sponsoring speculation on slim margins have already failed, and still more are tottering on the ragged edge.

One of the most unwise moves a speculator can make is to answer margin calls on doubtful stocks, thus throwing good money after bad. Even stronger issues whose basic price trend is downward should be liquidated with the idea of repurchasing them later. Too often the speculator thinks that because his charts, the tape, or bits of "inside" information, gleaned here and there, indicate an upward price trend for a stock, he is scheduled to reap a profit. A loss is his usual harvest.

The hardest part of the marginal trader's lot is found in the constant conflict that goes on between his judgment and his impulses. Seldom, if ever, is he right in both at the same time.

An illuminating illustration of this point occurred in the first two weeks of July this year.

A substantial group of marginal traders, seeing the market apparently weak, with stocks adhering consistently to low levels, decided that business conditions were no better. They went short of the market.

Unhappily, their judgment was wrong. On the eighth of July stocks started up strongly. There was a natural impulse to cover these short sales. Those who did so found that their impulse was right, even though it conflicted with their judgment. Those who resisted the impulse and remained short, paid accordingly.

Now, if the dyed-in-the-wool, struggle-scarred stock trader, dedicating all his time and energy to the market, finds it so difficult to

make money on margin—*what chance has the average investor who attempts to play the same game?* The answer is obvious.

To enumerate the ways by which marginal speculators are so often trapped would require volumes. Exposés of market manipulations have already been written—more are on the way. But one example will suffice at this time.

When a "bear raid"—that is, a concerted effort to depress prices—is to be made on a stock, how does it get started?

Often, a piece of stray gossip is the precipitating factor.

There is a lot of gossip in Wall Street. Most of it is chaff, but a little is pure wheat. Brokerage houses try to protect their customers' interests by secrecy, but there are often loose-tongued employees who reveal vital information—for example, that the house is carrying an extremely long line of a particular stock.

The eyes of the professional "bear" glisten at such news. He immediately gets underground wires working to ascertain if other large houses are in a similar market position. If they are, and no strong pool is supporting the stock, his campaign to send its price downward begins.

By means of a powerful raid in which several prominent manipulators may cooperate, the stock is attacked unmercifully. Unfavorable rumors are broadcast in investment circles. Tipsters are employed to disparage it. Statistical information, garbled to suit, is brought forth by way of proving the stock's imminent downfall. At the same time, small blocks of the stock, quietly accumulated, are combined for the purpose of sensationally unloading them in a tremendous selling wave. Public confidence at this juncture begins to waver.

Before long, the stock hesitates, weakens, [TURN TO PAGE 73]

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**CALMITOL**  
has also proven its  
effectiveness in . . .

**ATHLETE'S FOOT  
"JIGGER" AND  
MOSQUITO BITES  
VARICOSE ULCER  
POISON IVY  
PRURITUS  
ECZEMA**

# Calmitol

## for SIMPLE ACNE

Clinical results have shown in this stubborn inflammatory disease of the sebaceous glands, which occurs between the ages of 15 and 30 when glandular activity is most active, that if Calmitol liquid is applied to the papules two or three times daily, rubbing in rather briskly and covering with a smear of the ointment,

usually in a short time the papules disappear, and the skin returns to its normal healthy condition.

The attached coupon is for your convenience. Cut it out, write your name and address plainly, and mail today, for your professional supply of this remarkable preparation.

THOS. LEEMING & CO., Inc.,  
101 West 31st Street,  
New York, N. Y.

☐

Liquid

☐

Ointment

Dr. ....

Address .....

# Camphro-Salyl Ampoules

## Godel's Topo-Analgesic Method



Camphro-Salyl Ampoules (Fraisie) combine the analgesic-sedative action of benzyl salicylate (gr. 0.50) with the distinctly sedative action of camphor (gr. 0.10).

The use of Camphro-Salyl Ampoules in the hospitals of Paris has shown that after five or six injections, relief in acute and chronic rheumatism, sciatica, neuritis, lumbago and non-gonorrheal arthritis, is obtained.

Recently a very important additional new indication was brought to light by Dr. R. Godel, Chief of the Clinic, of the Paris Faculty of Medicine.

In a series of unique clinical tests, Dr. Godel has demonstrated Camphro-Salyl to be a highly effective measure for the control

of palpitations and cardiac pains.

He calls the Camphro-Salyl method of treatment "topo-analgesia." Its success is based on the fact that visceral pains are reflected to certain parts of the skin, corresponding to the innervation of that segment of the cord where sympathetic stimuli of visceral origin culminate.

*Complete literature and samples sent on request.*

E. FOUGERA & CO., Inc.,  
75 Varick Street, New York, N. Y.

As per your offer in Medical Economics, kindly send me, complimentary, professional sample Camphro-Salyl Ampoules, and literature.

Dr. ....

Address .....

City..... State.....

# Laboratoires Fraisse



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# THE CLUTTERED DESK

The Omaha-Douglas County Medical Society last month voted down a scheme for collectively rendering medical service on a yearly fee basis, which scheme had been proposed to it by a group of laymen.

The scheme was this: Members of the county medical society would form an association to give medical, surgical, hospital, and nursing care to families having an income of \$2,700 or less, for a yearly fee amounting to 3% of the patient's income.

From the proceeds, a lay manager would receive 30%, plus \$5 registration fee from each applicant, out of which he would pay overhead and operating expenses. 3% would go to the medical director, 20% to hospitals and nurses, and the balance (47%) to the doctors.

Reasons given for turning down the scheme were two: 1. "For the physician to give up the major percentage of his fees would be not only uneconomic, but professional folly," 2. "Middle men are not needed in the practice of medicine."

"I never expected so much publicity," said Dr. S. T. Shelly, Mulvane, Kansas, after his "baby homecoming" had achieved national fame last month. In his 52 years of practice, Dr. Shelly has delivered 4300 babies. To these, when he heard that Mulvane was going to hold an Old Settlers' Reunion, he sent special invitations for a "baby party." More than 300 showed up; oldest "baby" was 52, youngest three weeks.

In the costume he used fifty years ago, with saddle and pill-bag, Dr. Shelly rode beside fellow-townsmen in an Old West Parade down Main Street.

Visitors to the new East Side Medical Center, New York, report that points of the compass are marked in the tile floor at every corridor junction throughout the thirty stories; that each section is assigned a color scheme of its own—red for medical, blue for surgical, green for operating—carried out in wall tile and enamel.

Public-speaking tyros (the percentage of which is said to run high in the medical profession) have long wondered why most books on public-speaking are peculiarly unhelpful.

At last comes an answer in the form of a new book, "Public Speaking for Business Men," by William G. Hoffman (McGraw-Hill Book Co.) which proceeds on the idea of getting the potential speaker in a talkative frame of mind and letting the elocution fall more or less as it may.

Sympathetic with the man who thinks himself tongue-tied as a public speaker, this book instills confidence. It is an excellent bolster for the physician who trembles over a speaking date.



WITH SADDLE AND PILL-BAG

# Everybody's Business

By FLOYD W. PARSONS

**T**HE psychological panic has ended. The speedy rise in the stock market took care of that. Now come the more sober days of business building, with frequent periods of doubt and mistrust of the forces of recovery. Chronic pessimists will die hard, and the disappointed apostles of chaos will continue to emphasize the gravity of all unsolved problems.

But business and the markets, notwithstanding the scare talk of politicians and the occasional slips backward, will push slowly forward to a state of normality. Evidences of improvement in our basic industries will multiply in the weeks ahead.

We have learned a lesson the present generation will never forget. We went through something more than a mere depression—likely we will find it was the end of a journey, a sort of gap between an old order and a new one.

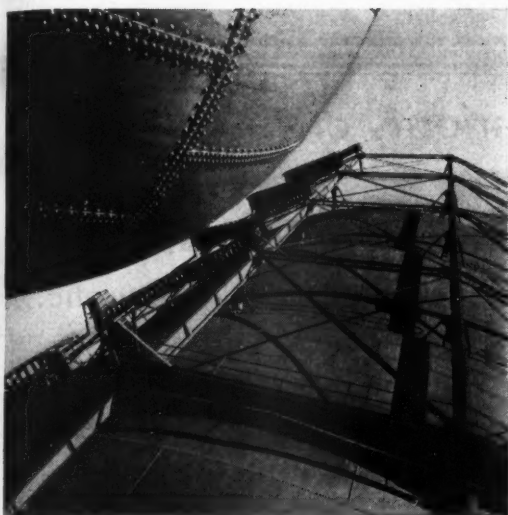
We will now work toward not only a national industrial program, but an international economic plan. It has been made plain to all that measures must be created to curb competition and regulate production. Our capitalism which is bitterly opposed to any form of socialistic government is moving speedily to a new kind of socialism in industry.

The aim is to transfer the control of trade and business from the hands of individuals to carefully selected boards. This is evidenced by price agreements made recently in the fields of sugar, copper, oil, coffee and rubber.

Government will have to abandon the idea that its chief role is to force competition. Business will be compelled to depart from its fatal policy of secrecy. Industry must consent to put its cards on the table and set aside all laws that block the free flow of information. A primary activity will be the gathering of thousands of facts about supply and demand which are at present missing.

Grocers in one large city were being ruined by competition, one with the other. A survey was made and they were taught how to play the game properly. They were instructed what to buy, where to buy, and where to sell. The result was that during a year of severe depression this intelligent analytical work of a cooperative nature caused failures to fall off 80 per cent.

National economic planning offers the greatest hope for today's ills. The field for such an effort is



## BREAKING THE DEPRESSION

"We are witnessing the slow and painful rising of the curtain upon a new scene in the great world drama...The action and setting will be different."

as broad as the world and as intricate as human life. Thirteen countries have already adopted some such scheme. France has a council made up of 47 members representing labor and capital. This body conducts business through a standing committee of ten. It transmits its recommendations to the Premier, and its value is attested by the fact that the government has introduced a bill to make it a permanent body.

Three years of adversity have taught us we cannot live on the past glories of American history; no mysterious magic rules over our institutions and ideals; and our only hope for a happy and prosperous future is to get away from unrestricted individualism

and construct our new era upon the more solid foundations of technical research, scientific planning and social cooperation.

Pages might be filled with evidences of a definite trend toward ultimate monopoly. The current realignment and consolidation of railroads is a movement in that direction. One large financial house is represented on the direc-

torates of 79 corporations with an aggregate capitalization of \$20,000,000,000 and assets considerably larger. More than 50 per cent of the nation's total wealth is held by one half of one per cent of the population; 80 per cent by only one-fifth of the population.

The tire companies have declined from 300 to 25, and one has grown so large as to be able to supply almost the entire market. More than 90 per cent of our output of cigarettes are four brands. One company handles 90 per cent of the nation's telephone business. One coordinated group sells half the oil in the world. Of 57,000 drug stores, 16,000 units are in one chain. More than 60,-

The superiority of

# TOLYSIN

*as an Analgesic and Antipyretic....*

**Semi-specific:**

Semi-specific action upon joints and their appendages in contrast to the general action of the salicylates—hence its success with acute rheumatic fever, chronic and acute arthritis, gout, etc.

**Not an Acid:**

It affords a maximum of gastric toleration because it is not an acid and does not become one in the stomach. It is a neutral *ester*—the ethyl ester of paramethylphenylcinchoninic acid.

**Tasteless:**

Acceptable to patients—a factor in more cases than you imagine, particularly with children.

**Uric Acid Eliminant:**

It is a thorough eliminant of uric acid.

**Wide Therapeutic Range:**

6 times that of aspirin (pharmacologically demonstrated). See chart.\* Even when abused, it is probably less active in liver and kidney impairment than cinchophen or sodium salicylate. General experience affirms the extreme rarity of toxic by-effects even in the high dosages properly accompanying acute conditions.

\*Based upon toxicity tests on dogs by Barbour and Lozinsky, the *Journal of Laboratory and Clinical Medicine*, Vol. VIII, pp. 217-225.

PHARMACEUTICAL  
A UNIT OF AMERICAN

Calco

DIVISION  
CYANAMID COMPANY

THE CALCO CHEMICAL COMPANY, BOUND BROOK, N. J.

## TOLYSIN

Ethyl Ester of Paramethylphenylcinchoninic Acid  
ANTIPYRETIC and ANALGESIC



# The wide therapeutic range of **TOLYSIN** the neutral chemical....

## Dosage:

2 to 3 five-grain tablets as an initial dose with a glass of water, repeating in such quantities as to produce a daily dosage of 12 to 20 tablets. In the essential use of high dosage (especially successful in Acute Rheumatic Fever), the inauguration of rest periods after 60 tablets (300 grains) is probably indicated, during which, medication can take the form of Magnespirin, the improved low-dosage aspirin—or the common salicylates, followed by further courses with Tolsin. For chronics and children suitable reductions may be made.

## Samples:

Nearly 15 years of experience with Tolsin has given ample and convincing evidence of its efficacy and superiority.

Samples are available for those physicians who have yet to experience its fine qualities.



Height of the bars shows the comparative therapeutic range of Tolsin, aspirin and cinchophen. Note that Tolsin has 2.38 times the therapeutic range of cinchophen and 6.0 times that of aspirin.

**Calco**

The Calco Chemical Co.  
Bound Brook, N. J.

ME 10

Gentlemen: Kindly send me a sample of Tolsin.

Doctor.....

Address .....

City..... State.....

000 grocery stores are members of seven chains.

Surely such facts demonstrate that trade and industrial freedom in the old sense are coming rapidly to an end. And we need not be at all alarmed over this development, for instead of restricting our personal liberty, it will give us more freedom, if we handle the problem with intelligence. The supervision of monopoly of basic economic functions, by the people themselves, will be made a stabilizing and beneficent force.

Our waste of effort and wealth in recent years has been an example of unparalleled human stupidity. We have preached efficiency, but failed to practice it. The Hoover committee of engineers who toured the United States studying industry at close range were astounded by the crude implements relied upon by business men to control the long-range production of goods. Other surveys have shown clearly that the opportunities to improve methods and equipment in nearly all of our offices and factories are indeed plentiful.

The big aim right now is to restore profits to normal. To accomplish this purpose everything must be subjected to the closest kind of scrutiny. Each product must be examined to see if it is exactly right for the market it serves. Articles that are too heavy must be lightened, thereby affording an economy in the cost of raw materials. Many products will have to be made more attractive in appearance, especially those which are merchandised in containers. Every article should be its own best salesman and require but a minimum of explaining. The average person prefers to buy rather than to be sold.

Never since this nation was created have the forces of greed and destruction worked so hard to handicap the agencies of re-

form. But selfishness usually carries on to an extreme where it provides its own cure. The intensity of today's distress has forced the masses to seek a root readjustment that will make it impossible for the savings of innocent people to be jeopardized again by the exercise of ignorance or dishonesty on the part of trusted officers in the banking, investment and speculative fields. Those who manufacture and sell stocks and bonds must assume some of the responsibility for soundness and quality in their products that is now assumed by the producers and distributors of other thousands of articles in every-day use.

We must now scrap all narrow loyalties to the questionable customs and practices of the past. We must recognize that change is inevitable and that to be frightened by it would be a definite admission of approaching national decline and death. We may be glad that no previous generation ever had such a fine opportunity as we have today to participate in the abolishment of many evil institutions that have come down to us as unhappy inheritances. No other generation ever had such a splendid chance to supervise the creation of a new order founded upon higher business ethics.

So it appears as we go along in this study of current business and industrial activities that radical changes may be expected the moment the clouds of depression clear away.

We are witnessing the slow and painful rising of the curtain upon a new scene in the great world drama. Although the stage and many of the players will be the same as before, the action and the setting will be totally different.

Science has made our rapid advance possible, and it will continue to be the chief factor in the progress of this civilization.

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# SARÁKA

TRADE MARK REG. U.S. PAT. OFF.

FORMERLY KNOWN AS  
NORMACOL

For your  
cases of

**HABITUAL  
CONSTIPATION**

THE principal ingredient of SARÁKA is Bassorit, a material which has almost magical powers of expansion and comes from India (haj sumg).

SARÁKA has been used successfully for constipation for many centuries in the Orient.



*We shall be happy to send you a complimentary package for clinical trial. Send the enclosed card.*

# **BULK** plus *Motility*

is brought about by the tremendous swelling power of **haj sumg** and a small amount of frangula. This stimulates the gastrointestinal tract as well as gives it a soft pliable mass. The result is a natural activity, with a smooth stool, moving regularly, without griping or intestinal disturbance.



**Swelling power of SARÁKA  
experimentally shown**



# SARAKA

TRADE MARK REG. U.S. PAT. OFF.

FORMERLY KNOWN AS  
NORMACOL

For your  
cases of

## HABITUAL CONSTIPATION

NON HABIT FORMING

PLEASANT TO TAKE

IMPROVED PRODUCT

LARGER PACKAGE  
(10 ounces)



Send the enclosed card for  
your complimentary package

**SCHERING CORPORATION**  
75 West Street New York, N. Y.

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# Advice to Authors

By A PHYSICIAN WHO  
LIKES TO WRITE, TOO

**T**HEY tell us that if you dig down in the field of Armageddon, you will turn up scattered bones of those who died long ages ago, perhaps in some "war to end wars."

If that is true, I'm going to be very careful from now on how I open my copy of MEDICAL ECONOMICS. I shall expect to find between its pages the neatly desiccated spine of some poet, or the shin bone (excuse me, the tibia) of an erstwhile Sunday feature writer. For the war is on!

It's a bitter fight, that battle over the writing question, between the "do's" and the "don't's." The issue is as yet undecided, but the mortality must be terrific. I propose to hover around the edges of that conflict, not so much with a desire to pick up the casualties, as with the still more humane object of preventing casualties.

Even an aspiring writer does not always have hard coins of the realm to throw at the birds.

The stock argument is this. I have an education. I have a lot of spare time going to waste. Why not use it to write a few bright articles or entertaining stories, and sell them to the eager editors?

That was what started the discussion. Pick up almost any copy of MEDICAL ECONOMICS, and you will find somebody's opinions on the subject, frank ones, too. Dr. A.B.C. says: "Don't do it. If you

Look out for the "critics" who offer to help you, for a fee—is the warning of this doctor-author, himself an ex-victim. Some may be of genuine help, but others prey on the gullibility of literary aspirants. The author of this article, who prefers to remain anonymous, does not discourage, only warns.

are out of the cradle, it's too late to begin." Dr. X.Y.Z. retorts that he doesn't believe anything of the kind. He's going to write when, what, and as much as he pleases. Selah!

I'm not going to be so foolish as to butt into that argument. What's the use? You wouldn't believe me, and you'd probably write anyway if that's the kind of a fit you are having. But about the time the rejection slips begin to accumulate, you'll send out an S.O.S. and look for help.

*And that is where you need the advice of some one who has been over at least part of the road.*

There is plenty of help being offered. If you pick up a copy of any publication addressed to writers, or more especially to would-be writers, you will find it crammed from cover to cover with the advertisements of those, who so kindly offer their help and criticism, at so much per crit.

Some time ago a man who claimed to know, estimated that the number of persons who were writing in this United States of America, constituted 93% of the census population. I believe he also figured that another 4% were getting ready to do so.

He started a scramble. Two years ago one writers' magazine carried 26 notices of those who



*Convenient  
Pure Argyrol  
Accurate  
Fresh Solutions*

# Self-measuring **ARGYROL** in TABLETS

for convenience, uniformity  
and freshness

**A**RGYROL is now put up in tablets. You can get pure Argyrol in packages of sixty 6-grain tablets. These tablets come in 3 vials to the package, 20 tablets each. (See package at top.) This self-measuring form of Argyrol has become extremely popular with the specialist in the short time it has been available. The reasons are obvious: (1) Those making their own solutions can keep their supply always fresh, owing to the ease of using the tablets; (2) No weighing is necessary; (3) The tablets insure an accurate and true solution; (4) A supply of the tablets can be kept in the office and also carried in the hand bag; (5) They are clean to handle and can be made up quickly at any time or place; (6) In tablet form there is no question as to whether you have *genuine* Argyrol or not, and you are always assured of accurate results. Call on your druggist. He can supply you.

**A. C. BARNES COMPANY, INC.**

*Sole Manufacturers of Argyrol and Otoferrin*

New Brunswick

New Jersey

October

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offered their help. A year later, there were 37. Now, in the same publication, 50 experts are tendering their assistance.

The harder it is to sell, the more help is being offered, which is quite all right, of course. And this does not include the great number who would teach you to write poetry or songs, or sell you a book. Scattered through all this are cards of stenographers, who would like to type your scripts. Some of them say they have a dictionary and will look up words you can't spell. It certainly seems that the news of this abundant crop has brought plenty of reapers.

Some of these advisors ought to be, and undoubtedly are, good. But unless you watch your step, you are very apt to fall into the hands of those who will take more than most beginners can afford, and give very little in exchange.

Stop to think a moment. How many of those who thrust themselves into the advertising columns, do you suppose, have as good an education as you yourself? Instead of encouraging your talent, they sometimes prove extremely *discouraging*.

I went the route, picking advisors with all the care possible, after the first one on whom I had cut my wisdom teeth. I sent him \$8.00 and a manuscript. Nothing happened. I wrote, but received no reply. Finally, a registered letter peremptorily demanding its return, brought it back. He had crossed out half a dozen words, and this was his sage advice: "John wouldn't do that. His wife wouldn't let him."

This advice might have been quite convincing, if there had happened to be any character in my story named John. There wasn't! My helpful critic had not even taken the trouble to read it.

I sent another script to a "critic" with the customary read-

ing fee. In this story there occurred the sentence: "He snapped on his lights and started the engine." The only advice I received from this brilliant genius, was that I should have had the man start the engine first, because some cars were hard to start after the lights were on.

Inasmuch as what I wanted was literary advice, and not a driver's license, I failed to see where it applied.

From there I went to higher levels, paying more and expecting more. I took a course of instruction, to be paid for by monthly installments. By the time I was \$50 in the hole I dropped it—which privilege was included in the agreement. It had proved to be more a guessing contest than a course of instruction.

Another highly recommended instructor persuaded me to enter into "collaboration" with him. He claimed that if we wrote a story together, he could teach me more than by any other method. He guaranteed to stay with me until we had produced a "salable" story.

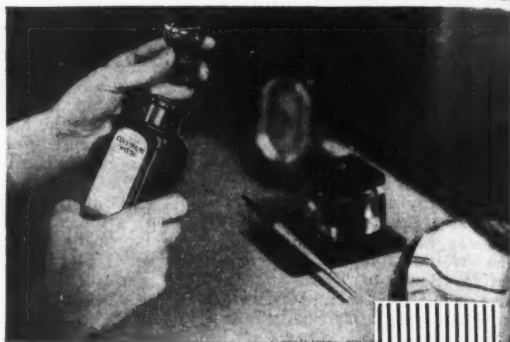
The script was finished. *He* pronounced it a "salable" story, thus winding up his agreement. Also he proposed to sell it for me. But it has been a very long time, and I am still waiting for a check.

I have said that some of these critics can be most discouraging. That is true, and often it is hard to tell what it is all about.

I wrote an article concerning a subject on which I had special and detailed information. I sent it, for an opinion, to a man who surely ought to know what he is talking about. He told me that it would not go. The public, he said, was not interested in this subject, and physicians already knew all about it. But it sold on its first trip, and brought several favorable comments from readers.

[TURN THE PAGE]

For  
The  
Eye

## Greater Protection More Convenient

Extemporaneous or home prepared eye washes are unlikely to be pure, sterile or of uniform strength.

But why take chances when you can recommend or prescribe a formula which has been standard with the medical profession for years.

### COLLYRIUM WYETH'S

REG. U. S. PATENT OFFICE

Collyrium offers a sterile, mildly astringent solution for use in acute and chronic conjunctivitis, hyperemia, inflammatory eye troubles, etc.

Also note the great convenience in the application of Collyrium—the ground-glass stopper in each bottle is likewise an eye-cup, always available for immediate use.



**JOHN WYETH & BROTHER, INC., PHILADELPHIA AND MONTREAL**

New York City  
Cincinnati, Ohio  
Kansas City, Mo.

Los Angeles, Cal.  
Portland, Ore.  
Saint Paul, Minn.

Boston, Mass.  
San Francisco, Cal.  
Chicago, Ill.

Denver, Colo.  
New Orleans, La.  
Atlanta, Ga.

LET US SEND YOU A BOTTLE  
OF COLLYRIUM  
FOR A TEST

John Wyeth & Brother, Inc. Dept. M.E. 10  
1118 Washington Avenue,  
Philadelphia, Pa.

Gentlemen: Please send me full-size  
bottle of Collyrium for clinical trial.

Dr. \_\_\_\_\_

Address \_\_\_\_\_

I sent several scripts, with a reading fee, to a man who claims to have unusual ability in placing manuscripts with editors. He was most courteous and encouraging at first. Then he suddenly changed, without any apparent reason, and wrote me a letter that burned me up. I blush still when I think of it. Among many other things, he said: "Your story is hopelessly off trail. It is very poorly written, and there is really not very much to it."

How was that for a jolt? But a little later, that same story took second place in a contest, judged by outstanding men, in which nearly 150 prizes were offered (and there must have been hundreds of entries). That circumstance went a long way toward removing the curse, but I found it hard to explain.

There was one advertiser to whom I gladly take off my hat.

He at least did not hesitate to tell the truth, including his opinion of himself. His advertisement was enclosed in a rather imposing box, and began like this:

My services are only for those who are really sincere... My time is far too valuable... I consider it a sacrifice unless a worthy purpose is served... I do it because of my good will toward the amateur writer...

The money must accompany the story... Please do not bother me with unnecessary inquiries.

That advisor was certainly full of the milk of human kindness. But I'm afraid it had curdled on him.

Without taking sides in the great discussion, my advice would be:

*Write if you feel that you must (you will anyway). But do not expect sudden fame or riches.*

Pick your literary advisor with judgment, and above all, Don't Be the Goat.

## Ethical Publicity

**T**HE increasing discussion of advertising methods for ethical physicians must eventually bring results. After reviewing many of the suggestions, I wish to offer another, which I believe to be a dignified manner of publicity.

The medical profession, to survive financially, must come out from under the basket and let the world know what it is and what it can do.

In years gone by, the title of doctor carried with it merited distinction and respect. Today, it is applied to chiropodists, chiropractors, osteopaths, optometrists, opticians, ministers of the Gospel, veterinarians, beauty specialists, and provenders of patent horse collars or electric belts.

To insure the fullest benefit from membership in the county and state societies, I recommend an extended use of some symbol—the cross within a circle—or any other one which could be copyrighted.

This symbol should be used following the physician's name and degree, or after his designated specialty in medicine or surgery, as well as on his stationery, office doors, cards, and in the telephone book. Its significance will then deserve to be emphasized to the general public through advertising by the county and State, or by the American Medical Association. FRANK M. POSTLETHWAITE, M.D.



The great psychologist,  
William James,  
Sized man up rightly  
As a creature of habit.  
His habits once formed,  
Man holds on to them  
Tenaciously.  
Any attempt at change meets  
With great resistance.  
Regular bowel movement  
Is also the result  
Of the formation  
Of regular habits.  
This is possible  
When AGAROL  
Is the treatment  
Of *constipation*.  
For Agarol,  
The original emulsion  
Of mineral oil and agar-agar  
With phenolphthalein,  
Not only softens

The intestinal contents,  
But also gently  
Stimulates  
The peristaltic function.  
This makes evacuation  
Not only easy  
But also certain  
When a dose,  
A tablespoonful,  
Is taken  
At bedtime.  
Soon after breakfast  
Next morning  
Evacuation  
Takes place.  
Repeated daily  
This soon will grow  
Into constant habit.  
Regularity  
Makes for habit;  
And habit  
For regularity.  
And Agarol  
Promotes both.

+

Would you try it  
And be convinced?  
Just write—and soon  
A package will be  
On the way to you.

Agarol is the original mineral oil and agar-agar  
emulsion with phenolphthalein . . . Palatable,  
easily mixed with other liquids, when desired,  
Agarol is suitable for every age period.



## AGAROL for Constipation

WILLIAM R. WARNER & CO., Inc., 113 WEST 18th STREET, NEW YORK CITY

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# Ex-Pharmacist

## A PHYSICIAN CONTEMPLATES THE DRUGGIST'S PROBLEMS

By Carl C. Aven, M.D.

**I**F I am able to understand the problems of the man who owns the drug store around the corner from you, with a little more sympathy than seems to be ordinarily possible, it is because I was once a pharmacist myself.

At the outset I want to define clearly what I mean by a pharmacist. He is a man who loves pharmacy, who takes pride in his profession, who conducts his prescription department with all the seriousness of his soul. I do not consider that the letters Ph.G. make a pharmacist. If he considers the prescription branch of his business as merely a public accommodation, or as a fairly profitable sideline, he is not in my estimation worthy of his degree.

There are plenty of pharmacists who *are* sincere, just as the majority of physicians are thoroughly professional at heart.

Pharmacy is a profession. It comprises the art and science of collecting, identifying, preparing, preserving, compounding, and dispensing drugs and medicine. These are connecting stages in the transformation of crude medicinal substances to the finished product, ready for the consumer.

True enough, the pharmacist no longer puts up in his laboratory many of the pills, tinctures, and other preparations which he is called upon to dispense, but this does not change the function of pharmacy. It merely calls for a division of labor.

In the early history of medi-

cine, the pharmacist and the physician were the same individual—"the medicine man." As civilization progressed, the preparation of drugs and medicine became a specialized field of medical science.

The pharmacist of today is still imbued with the ethics and traditions of an ancient profession. Like the physician, he must be qualified by education, training, and official recognition to dispense drugs. Also, like the medical practitioner of today, he is faced with a multitude of burdensome economical and professional problems.

Some of these problems have come about in the natural way of evolution, and are slowly being solved in the same way, a splendid example of this movement toward solution being the St. Louis Drug Store Survey now in progress under the sponsorship of the U. S. Department of Commerce. Others of his problems are directly the result of lack of mutual understanding between these two professions which once were one.

Cooperation! A beautiful word, much abused. But we are learning its meaning, from a practical standpoint, in business and in the professions.

It is some of these problems which result from the doctor's failure to extend the pharmacist a measure of cooperation, and which in turn react to the physician's disadvantage, that I want to discuss here.

Having been both a pharmacist

# S·M·A·Corporation

of Cleveland, Ohio, announces  
to the medical profession that  
it has been awarded sole rights  
for the ethical distribution of

## Vitamin D

produced from Cod Liver Oil  
under license United States  
patent 1,678,454 issued July  
24th, 1928, developed in the  
laboratories of and con-  
trolled by Columbia University.

This is Natural Vitamin D, not an irradiated product, and not a cod liver oil concentrate, but rather a highly potent extract of the antirachitic principle of cod liver oil. It is extracted and prepared in suitable form for therapeutic use by methods developed by Doctor Theodore F. Zucker, Assistant Professor of Pathology at the College of Physicians and Surgeons of Columbia University.

This Vitamin D is now available for therapeutic use in 5cc and 50cc bottles. The concentration is such that 10 drops is equal in Vitamin D potency to three teaspoons of standard potent Cod Liver Oil. It is palatable and free from objectionable taste. This new product will be ethically advertised and carefully distributed through prescription pharmacies. It will be sold at prices approximately the same as those current for equivalent dosages of plain Cod Liver Oil. Interested physicians are invited to write for full information and complimentary samples to S. M. A. Corporation, 4614 Prospect Avenue., Cleveland, Ohio.

**NOW !**

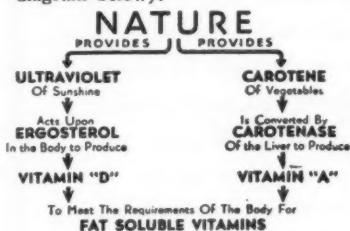
# PRIMARY VITAMIN A

( CAROTENE )

*The Latest Contribution  
to Vitamin A Therapy*



Carotene is to Vitamin A what sunlight is to Vitamin D therapy. Carotene and sunlight are nature's forms of the fat soluble Vitamins A and D. While this has been appreciated for some time in the case of sunlight, the realization was long delayed in the case of Carotene. (See diagram below).




### New Vitamin A Therapy

In Caritol and Smaco Cod Liver Oil with Carotene, physicians now have Primary Vitamin A in two convenient potencies for prescribing. **Caritol**—Caritol is a 0.3% solution of Carotene in bland oil. It provides a safe, palatable and convenient concentrated solution of Primary Vitamin A (or Pro-Vitamin A) for use wherever Vitamin A, Carotene or both are indicated. The entire absence of all fish flavor from Caritol, and its attractive red color make it especially acceptable to your patients. Caritol may be used alone, or with Viosterol, or with Cod Liver Oil. (See Smaco Cod Liver Oil with Carotene).

**Cod Liver**—Smaco Cod Liver Oil with Carotene is a high Carotene grade of cod liver oil fortified with crystalline Carotene which increases its Vitamin A potency 1000 International Units per teaspoon. It provides a most convenient method of administering Primary Vitamin A or Carotene in conjunction with Vitamins A and D of cod liver oil. It may be used wherever any cod liver oil is indicated; also wherever Carotene in dilute solution is desired. Although Carotene is not a flavoring agent, nevertheless the addition of Carotene to cod liver oil noticeably improves the flavor.


**CAROTENE**  
CRYSTALLINE

**CARITOL**



Ten drops  
of Caritol  
contain  
**1000**  
International  
Units  
of Vitamin A.

**COD LIVER OIL  
WITH CAROTENE**



One teaspoon contains **1000** International Units of Vitamin A in the form of Carotene in addition to the A and D content of the original oil.

For complimentary samples, simply attach coupon to your prescription blank or letterhead.

Without obligation or charge please send: 2-102

- ☐ Additional Information
- ☐ Samples Caritol (Carotene in bland oil)
- ☐ Samples Cod Liver Oil with Carotene
- ☐ Prices on Crystalline Carotene for research

**S. M. A. CORPORATION, CLEVELAND, OHIO**

LABS-S. M. A. CORPORATION, CLEVELAND, OHIO

(Attach coupon to prescription blank or letterhead)

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and a physician I am in a position to appreciate doubly the value of ethics. I have often wondered why the principle of ethics which is instinctive with every genuinely professional man, seems to end so abruptly in the physician-pharmacist relation. This thought leads me to ask why it is not feasible for pharmacy and medicine to get together and work out a joint code of ethics affecting their relations.

As doctors, why shouldn't we play as squarely with the pharmacist as we do with our fellow practitioners? Remember my definition of pharmacist. Having established the fact that a druggist regards his prescription department with genuine earnestness of purpose, and is in other respects a professional man at heart, why should we not accord him the courtesy he deserves?

Think over just how these questions apply to you. Don't belittle the pharmacist. Don't disparage him because of hearsay. Don't make general statements that will hurt him, just because you are disgruntled at something that has gone wrong in your relation with a particular pharmacist. Be ethical.

An important duty we owe to the pharmacist is aiding him to comply with all the legal requirements which are necessary for the conduct of his business. A specific instance is cooperation in conforming with the narcotic laws. A physician is prone to lose his perspective when striving to relieve a suffering patient, but his sympathy hardly justifies him to expect the druggist to violate the law.

If a pharmacist has extended the courtesy of accepting from you a narcotic prescription over the telephone, it is your urgent duty to sign the prescription at the earliest possible moment. You owe the pharmacist every protection within your power just as he is obligated to protect you.

The recent intensive survey of drug stores in St. Louis showed that 3% of the prescriptions written by physicians are illegible. It is safe to assume that a great many more than 3% are only fairly legible. One of our most obvious duties toward the pharmacist is to write the prescription in such a way that it may be interpreted accurately, and to write it with pen and ink so that it will endure as a permanent record.

When a pharmacist is in doubt about the meaning of a prescription, it is his obvious duty to communicate with the physician. Therefore, when our pharmacist telephones us in order to check up on the exact meaning of a prescription, let us not be offended. To do so is to display extremely limited vision. Particularly are we obligated to the pharmacist, when he catches an error we have inadvertently made, for physicians do make errors. Many a mistake which might, if not detected, have meant serious results to the patient, has been intercepted and referred back to the doctor by an alert pharmacist.

There is another duty that we owe to the pharmacist and patient jointly, and that is to tell the patient in advance if a prescription contains costly ingredients. A patient who is accustomed to paying less than \$1 to have a prescription filled, naturally receives something of a shock when the druggist announces a higher price. It is only common sense for a doctor, when he writes a prescription which he knows will cost more than usual, to prepare the patient's mind by the casual remark, "This prescription is somewhat expensive."

This simple procedure avoids later criticism both of the druggist and of the doctor writing the prescription.

While reading this article, the average doctor's mind is probably dwelling more or less acute-

# FOR THE NERVOUS CHILD

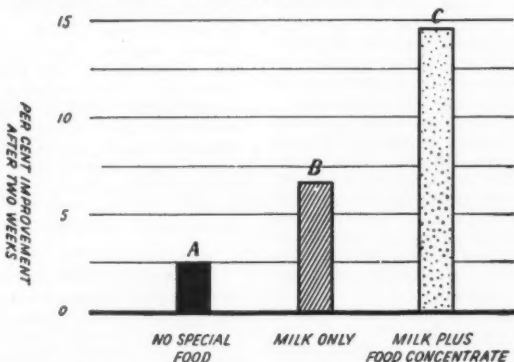
## *A Diet Reinforcement*

That the "nervous child" is a phenomenon only too common in our midst today is an acknowledged fact.

Working upon the hypothesis that hunger pangs or metabolic variations, particularly lowered calcium metabolism, are a prevalent cause of nervous behavior, a series of interesting tests was recently made at a leading University in the East.

It was found that by reinforcing the diet of children with a special food concentrate, nervousness was considerably reduced, as measured by the Olson-University of Minnesota behavior check list.

The research workers chose Ovaltine as the food concentrate for the reason that it most closely approximated the theoretical diet requirements of the test, it being particularly rich in calcium and phosphorus, easily assimilable proteins, carbohydrates and fats, as well as essential vitamins. Cane sugar was absent.



The diagram shown here illustrates the distinct advantage of reinforcing the diet of nervous children with this special food concentrate. Column A shows improvement in nervous conditions when no special food was given; Column B when milk alone was given; Column C when the food consisted of milk plus the food concentrate Ovaltine.

# OVALTINE

## *The Swiss Food-Drink*

Manufactured under license in U. S. A.  
according to original Swiss formula

For Trial Supply Use Coupon  
Below—Offer Good One  
Time Only Except in  
Special Cases

THE WANDER COMPANY, 180 N. Michigan Ave., Chicago, Ill. Dept. M.E. 10  
Please send me a regular size package of Ovaltine and full literature without charge.

Dr. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

ly upon the thought, "What about counter-prescribing?"

Counter-prescribing is a violation of the ethics of pharmacy. I will grant that it is probably a rather common violation. But I maintain firmly that few communities exist where there is not one pharmacist or more who regards his profession seriously enough to refrain from counter-prescribing, and who forbids his clerks' attempting to do so.

Why shouldn't druggists sit in

occasionally with us at our medical meetings? Why shouldn't we accept them whole-heartedly as fellow professional men, even as we accept the nurse and the technician as fellow-workers?

That would be a basis for real cooperation.

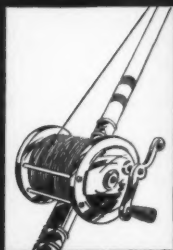
I believe there should be more of this class of pharmacist. I believe there *can* be more, if and when physicians hold out the hand of fellowship and pledge the ethical druggist individual support.

## "Doctor is out" answers record



"This is Dr. Jones' office. The doctor will return at two o'clock—" would be the message automatically given to patients telephoning out of office hours, by a talking device recently perfected by a Texas inventor. The device works in this way: Before leaving the office, the doctor dictates his message on a record, connects the record with the telephone, and rests secure in the knowledge that the machine will automatically answer every caller with equal courtesy. So far the inventor has not figured out a way to make the machine enter into spirited discourse with patients regarding bills, or to give directions for administering Johnny's medicine. The physician, however, can be sure that the device will not hold any long-distance conversations with friends during his absence.

SURGICAL **BAY'S** DRESSINGS



### Why Not Switch to the Reel?

**T**HERE are many improved containers for adhesive plaster on the market but all except one are still the old-fashioned spool dressed up to look nice.

The Bay reel container is the only departure in the right direction. It eliminates awkward unwinding. It is dust-proof. BAYHESIVE, the improved zinc oxide adhesive plaster, *handles better* as a result.

**THE BAY COMPANY**  
BRIDGEPORT, CONNECTICUT  
A DIVISION OF  
**PARKE, DAVIS & CO.**

THE BAY COMPANY, BRIDGEPORT, CONN.

Gentlemen: Kindly send me a free sample of BAYHESIVE.

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Street and Number .....

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Surgical Dealer .....

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# You Can Lead a Horse

AND YOU CAN LEAD THE  
PUBLIC TOO . . . BUT—

By Donald McCaskey, M.D.

**G**ETTING a horse to drink water is as nothing compared with the task of enticing the Great American Public to accept the periodic health examination idea.

Probably the main reason why this is so, is that we, as physicians, are not thoroughly sold on the idea ourselves. To go further, too many of us are not fully aware of what a health examination is, of what procedures it should consist, for what objects it should aim.

Because we see it so vaguely, we do not become enthusiastic; and without enthusiasm and sincerity on our part, how can we blame the public for its apathy?

We talk of leading the public to the wellspring of health, and when it gets there it finds only a trickle. No wonder it does not drink. The fault is ours.

We must be the teachers, and no teacher can hope to succeed unless he knows his subject. What subject is richer than preclinical medicine? So far, the efforts to establish the health examination as an entity of medicine, to standardize its procedures and to give it concrete form, have been sparse and disorganized.

The only remedy for this situation is to have organized medicine correlate the really worthwhile activities now existing in the field of preclinical medicine, and give the many thousands of general practitioners the country over, a standardized set of procedures, clearly defined.

Given this scientific basis, the practitioner must then fire his own mind with enthusiasm and be ready to devote the time and the effort to selling the idea to his patients.

The periodic health examination cannot be substantially sold to the American people on any hit-or-miss basis. Its acceptance must be the logical consequence of directed effort.

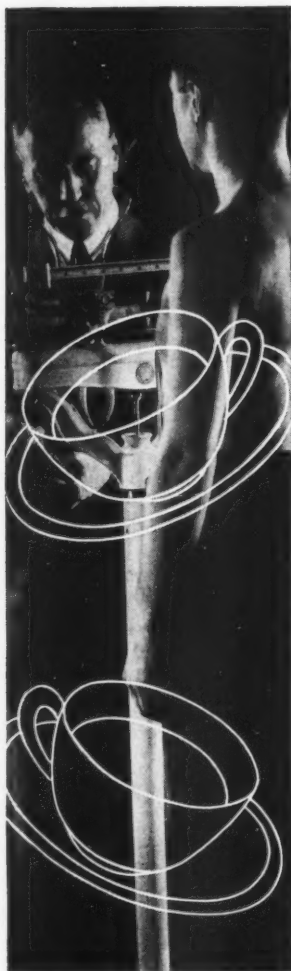
In the beginning, only a comparatively small portion of the American people can be expected to recognize the value of periodic health examinations; but we must not be discouraged with that. It is merely a form of inertia. Many people's minds are closed entirely to every new idea until they see that it is being accepted favorably by their fellow men.

In every physician's practice there are patients intelligent enough to appreciate the benefits of the health examination. These are the ones to concentrate upon. Make them enthusiastic, build up their enthusiasm as you go through with the procedures of the examination. Afterwards, make them conscious of the benefits. Make them see that a definite slice of life and health has been given them.

They in turn will preach the gospel to others. In the course of time the inevitable result will be a regular health examination clientele.

I have been insisting since 1915 on a regular [TURN TO PAGE 144]

# saying "no" to caffeine without saying "no" to coffee!



MANY PATIENTS are so wedded to coffee that it is a severe test of their will-power to have to give it up. That's why more and more physicians are recommending Sanka Coffee—genuine, delicious coffee with 97% of the caffeine removed.

Send the coupon below for a free quarter-pound. When it arrives, make the night-test—drink your first cup at night. Next morning you'll know that Sanka Coffee can be enjoyed without causing sleeplessness, indigestion or nervousness. What is more, its full, rich flavor removes from the patient any desire for caffeine-containing coffee.

Sanka Coffee is real coffee—a superior blend of the choicest Central and South American coffees. Coffee experts recognize that no other blend is finer.

Sanka Coffee has been accepted by the Committee on Foods of the American Medical Association with the statement: "Sanka Coffee . . . is free from caffeine effect and can be used when other coffee has been forbidden."

Send the coupon for a free quarter-pound. With it we shall be glad to send a copy of "The Passing of 'Thou Shalt Not'"—a more complete discussion of Sanka Coffee.

**REAL  
COFFEE**



**97 % OF THE CAFFEIN REMOVED**

**SANKA COFFEE CORPORATION M. E.—10-22**  
1 Joralemon St., Brooklyn, N. Y.

Gentlemen: Please send me without charge a 1/4 lb. package of Sanka Coffee—also the booklet, "The Passing of 'Thou Shalt Not.'"

Name.....

Street.....

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This offer not good in Canada

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# The R. N.'s Place in Office Work

By EVANGELINE INGERSOLL, R. N.

**H**AS the trained nurse a logical place in the doctor's office, and, to reverse the question, has the office girl who holds the status of R. N. the right to consider herself an active member of the nursing profession?

It is as much the physician's business as it is anyone's to consider the answers to these questions. As the "boss," he has, or should have, an interest in improving both the quality and the professional morale of his highly important team-mate—the office nurse. It is through interest and guidance on his part that the doctor can turn this employee of his into a one-hundred per cent asset to his practice.

In 1904, when I first entered the field of nursing, the employment of Graduate Nurses in physicians' offices was comparatively rare. At that time there were few, if any, trained technicians in the various therapies—X-ray, pathological laboratories, physical therapy. The situation has changed since then. Now, practically all of the specialists in these branches employ Registered Nurses as technicians; the opportunities in this line of work are almost unlimited.

It is my point that the position of office nurse should be rated equally high with that of the laboratory and physical therapy technician. In every case where office practice forms the bulk of the work, the physician should call for a Registered Nurse. The type of personnel re-

quired for the position should be rigidly specified.

On the face of it such a proposition will be instantly voted down by a number of readers on the ground of the extra expense involved. However, it is part of my premise that if a practice is large enough to warrant the employment of a full-time woman assistant, a Registered Nurse can more than make up the difference between her own salary and that of an untrained assistant, by the wise use of her extra qualifications.

Most physicians and surgeons, and some dentists, have come to a realization of what it means to have trained assistants in their work, and especially is this true in meeting patients and others wishing appointments. To be able to distinguish between the professional and business inquiries requires unlimited tact, for most callers dislike to give information to anyone other than the person they wish to see. Here is just one place in which the professional background and understanding proves invaluable.

The Registered Nurse with some business ability soon becomes of inestimable value to her employer, as she gradually grows into taking full charge of the business side of his practice. Unlike the sheer business woman, she is able to do this without for one moment losing sight of the *human* and *professional* side of her work. I will admit that there are nurses, Registered Nurses, to

## WHITE ROCK *and* Milk of Magnesia

You probably have patients who cannot or will not take Milk of Magnesia regularly or at all.

Suggest White Rock Mineral Water instead of plain water. Of course it is more palatable. When the Magnesia is prescribed as an antacid or for gastric discomfort, the White Rock often appears to speed up relief.

Why not test this on yourself sometime?

White Rock Mineral Water makes many prescriptions more palatable.



# White Rock

*The leading mineral water*

AUTHORITATIVE BOOKLET SENT ON REQUEST

WHITE ROCK MINERAL SPRINGS CO.,  
100 Broadway, New York City.

Gentlemen: Please send me your booklet "White Rock in the Diet".

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Address

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whom a patient is just another case. Obviously these should not take up office work. That is what I meant by "extra qualifications."

It is one reason why I feel that office nursing should be made a professional entity. A nurse unfit for this branch could do untold damage to a practice by the feeling, or lack of feeling, which she would create among the people with whom she would come in contact.

It is, in my opinion, the duty of the Registered Nurse who takes up office work to maintain the high professional standard acquired in her training. If she loses sight of this and becomes only a business woman, she will soon come to a realization of the fact that her field of usefulness is limited. It is only through adherence to that standard that she can successfully combine the professional with the business side of her work.

When she arrives at that state of perfection where she can go smilingly before an office full of impatient people, who have waited well past their appointed time, and tell them there will be a still longer wait—and make them feel that it is a privilege, rather than a hardship—then she becomes not only a professional business woman, but a DIPLOMAT.

Giving the nurse who is temperamentally adapted to office

work, and has taken special training for it, due recognition in the form of a certificate, would be a tremendous stimulus toward building up a corps of professional assistants.

The attitude of the nursing profession itself so far has given the impression that when one becomes an office nurse, she has dropped out of the field of active nursing. Nothing could be further from the actual situation. The office nurse must be able not only to be an intelligent listener to complaints, as well as to praises, but she must be able, through her knowledge of present day routine, to explain, and to overcome any prejudice the patient may have acquired through a misunderstanding of the procedure to be employed.

The question of whether to consider office work as a recognized specialty of nursing was brought up before the annual meeting of the American Nurses' Association in Milwaukee in 1930. No action was taken, but the fact that nursing organizations are considering the question, helps to prove its importance. Soon the office nurse will have definite recognition. Soon she will be fully accredited as a nursing specialist. She is entitled to the recognition.

Any physician who thinks otherwise does not appreciate the advantages he is missing.

## ... AND THE DOCTOR ALWAYS PAID!

Yes, paid entirely too much for his stationery. But now he can buy *quality* stationery at a real saving to him. Everything he needs is available and he pays prices in line with those shown here.

Samples, and a complete price list are sent on request.

**PROFESSIONAL PRINTING CO.**  
312-316 Broadway New York, N. Y.

## Do you pay more?

Prescription Blanks	\$1.65 per M
Business Cards.....	1.90 " "
Statements or Bill-heads .....	2.15 " "
Letterheads	
5½ x 6½.....	2.15 " "
Envelopes, printed..	3.00 " "
Gummed Labels, printed .....	2.50 " "
Announcements, Card records, Drug Envelopes, loose-leaf records and ring books, Special Form, etc. at similarly attractive prices.	



**I**n gynecological examinations, the physician is often aware of unpleasant conditions and emanations requiring treatment. Many physicians say nothing, but prescribe Norforms for regular use by such patients.

Norforms are deodorant in effect, and diffuse active medication throughout the vaginal tract. Thus, the non-irritating Norform antiseptics are kept in prolonged and effective contact with vaginal mucosa for the treatment of inflammatory conditions such as leucorrhea, vaginitis and cervicitis.

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**Norwich** Norforms  
are convenient, require no apparatus for application, and are standardized, stable and unvarying.

## NORFORMS FOR VAGINAL PROPHYLAXIS

M-10



*The ideal formula in the ideal form*

# "X" Equals Success

## A DOCTOR'S SELF-ANALYSIS

### As told to Hall Johnston

This is the second part of Mr. Johnston's narrative about the young physician who is pursuing that elusive quality—a successful professional personality. Here he encounters another lesson or two he did not get in medical school, or as an interne.

It so happened that the first person who called on me for professional advice after I decided to revise my attitude toward my patients was a rather intimate friend of mine.

"Hello, Dick," I said to him as I extended a friendly hand, "sit down and rest your bones."

"I would like to, Doctor," he replied, "but I came in this time on a serious mission. I need your advice."

In another moment or so we were plunging into his history, and as I filled out the card I had placed before me I became more and more absorbed in the case. The examination completed, I made a diagnosis and gave him some instructions for immediate execution.

"Doctor," he said, "I know those are your instructions as my physician, but as my friend are you really going to make me do all those things?"

Of course he was joking, but the question brought me to life with a distinct start. It reminded me of my resolve as to a change of attitude. For more than half an hour I had been examining and questioning my friend, and it took this question from him to make me realize it. I had re-

solved not to lose my character as a human being just because I had to assume that of the doctor. I had resolved to take a human and friendly interest in my next patient. And here I was, listening to the very heart-beats of an old friend—like a scientific automaton. It took his remark to remind me that he *was* an old friend. What chance, I thought, had I to put my new theory into practice with strangers?

I had, of course, read a good deal and studied some about dual personalities. I wondered if I could be a dual personality, one side of it controlling me in my work and another in my ordinary relations with people. I knew I was not disliked by my friends and acquaintances. Was it possible that I was actually being disliked by my patients?

It struck me as nonsense, and I decided that hereafter, if I did have one self for my patients and another for my friends, I would fuse them. Whatever I had that attracted my friends must be made to likewise attract my patients. If I did not have that elusive quality, that necessary "it," I resolved to acquire it.

It is not easy to alter habits of long standing. I found it even more difficult to change a trait that seemed to be so fixed in me that it became a part of my character. I tried several experiments. Any effusive display of friendliness I found led to an assumed familiarity that I did not feel, and I quickly abandoned that notion. [TURN THE PAGE]

# The Success of a Pioneer



*Patch's Flavored Cod Liver Oil has deservedly achieved the endorsement and recommendation of a large percentage of American physicians because it has pioneered a definite advance in cod liver oil medication.*

\* \* \*

It was the Patch Company who helped to revolutionize the production of a palatable cod liver oil of high vitamin potency. This was accomplished by specialization and research culminating in the introduction of newer and better methods for cooking, chilling, blending, assaying and finally flavoring.

\* \* \*

When Patch's Flavored Cod Liver Oil is prescribed, the doctor is assured that even the fussiest youngster or the most fastidious adult will find it acceptable because of its palatability. In addition, every bottle carries a guarantee of potency in terms of contained vitamins A and D.

\* \* \*

The guarantee is your assurance of potency; a personal test will convince you of its palatability. May we send you a bottle with our compliments, for a test?

## The E. L. PATCH COMPANY

Boston, Mass.

The E. L. PATCH CO.,  
Stenham 80, Dept. M. E. 10,  
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Gentlemen: Please send me a sample of Patch's Flavored Cod Liver Oil and literature.

Dr. ....

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Intimate inquiries into the daily life of patients, which I knew were more or less successfully indulged in by some of my contemporaries, made me feel uncertain and ill at ease, and even seemed to embarrass the patient. I simply could not bring myself to the point of committing what I felt to be absurdities in professional consultation. The fact that others were succeeding with similar tactics made them none the less impracticable for me.

It remained for a little girl patient to give me a new lead. With her mother sitting by, I began an examination of the child's throat. She looked at me with big, somewhat frightened eyes, as her face registered the consternation she felt. Her mother made some remark that distracted her, and, with her troubles forgotten for the moment, she looked up at me and smiled.

It was a smile that was not to be resisted, and it brought me out of my professional abstraction in a hurry. I smiled, and as I did so, the big eyes took on a look of understanding. It was the first thing I had done that she understood.

From then on she was a willing, responsive little patient. When I said good-bye, she held out her hand and smiled. Here, I thought, was a patient who would *want* to come to see me again. I wondered whether she might be the first one. My education was advancing.

I felt that there was a valuable lesson in my experience with this little girl. The application of it to the average patient was not, however, so simple. It took me a long time to work it out. I could not go about grinning at my patients like a Cheshire cat. Outright levity seemed out of place in the consultation room. At times my work took on a very serious aspect for both physician and patient. [TURN THE PAGE]



## AROMATIC LIVERX ZEMMER

### To replace the Liver Diet

Patients who rebel against the monotony of the liver diet will welcome AROMATIC LIVERX. Each tablespoon represents a full quarter-pound of fresh liver of clinically controlled potency, in pleasant aromatic solution.

AROMATIC LIVERX has proved unusually effective in the treatment of pernicious anemia. Let us send you literature.

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CHILDREN'S CLINICS ARE INTERESTED IN



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SIEVED VEGETABLES

In response to a coupon request, we sent samples of Certifoods Sieved Vegetables to a Children's Clinic.\* With the samples we mailed a letter in which appeared the following statement:

"Certifoods is the brand name of the line of sieved vegetables which embody certain unusual and important features. For example, each of the six products is guaranteed for a definite vitamin content and all are accepted by the Committee on Foods of the American Medical Association. These products are put up in 4½-ounce enamel-lined containers."

The reply, acknowledging receipt of the sample of Certifoods, is particularly significant to all interested in pediatrics. It reads as follows:

"We received the specimens of Certifoods Sieved Vegetables sent for our inspection and approval. We are much pleased with it and see no reason why it should not be preferred over the many other baby foods on the market. We are adding Certifoods to our diet lists and shall recommend it verbally whenever the opportunity presents itself."

No claim is made for Certifoods that has not been substantiated by adequate laboratory and clinical research and test. It is only by extreme care and constant checking that we are able to guarantee definitely the actual A, B and C vitamin content of each variety of Certifoods. This guarantee is printed on the label of each container and gives the vitamin content of each variety in Sherman units. No other sieved vegetable bears such a guarantee.

Certifoods provide a diet for infants that is appetizing, smooth, bland and non-irritating. They retail in enamel-lined containers at 15 cents each. Professional samples, together with nutritive and assay report, will be sent to physicians on request. You are invited to use the coupon.

\*Name on request.

**Certifoods**  
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Subsidiary of  
**THE MALTINE COMPANY**  
30 Vesey Street New York, N. Y.

THE MALTINE COMPANY, *Certifoods Division*,  
30 Vesey Street, New York, N. Y.



Please send me professional samples of CERTIFOODS and copy of the vitamin and nutritive assay report.

Name of Physician.....  
Office Address.....  
City or Town..... State.....

SEE MALTINE ADVERTISEMENT ON PAGE 33

I knew a few doctors whose greetings to their patients usually took on a show of hilarity. I had no desire to emulate them, and could not have done so had I wished. I realized that, whatever course I might decide upon, it must conform to the unchanging instincts with which nature had endowed me. These could not be entirely rooted out. Nor would I want them to be.

I gave up the idea of smiling at patients. I tried, for a time, to smile with them. The magic that is behind the smile that wins still eluded me.

Then, one evening, accompanied by the young lady of the automobile accident, I attended a musical show. Here were half a hundred young men and women, smiling every minute they were on view. The show sparkled with life and gayety. Then suddenly there tripped to the footlights a slip of a girl. As the orchestra played what proved to be the prelude for her song, she looked at the audience in such a way that I imagine each one of the audience thought the glance was directed particularly at him.

As she began singing, the lilt and shading of the music, and the sentiment of the words were instantly reflected in her face, her smile and her actions. The smiles of the others may have been ordered by the production manager, and rehearsed into perfection. This girl expressed the

emotions she felt, produced by her sense of artistic accomplishment. It was a triumph for her, and the high spot of the show.

"What was it," I asked my companion, as we left the theatre, "that enabled the girl to win her audience so completely with a single song?"

"Well," she replied, "the girl is an artist to her finger tips, just as you are a doctor from the top of your head to the soles of your feet."

"I wish I could win my audience like that," I remarked.

"The difference is wholly in the manner of expression," she said. "In the show business, it is not enough that your stunt be well done. It must be that, of course, but in addition you must 'get' your audience. I know a male concert singer who says that there is one spot in every concert where the audience is won. Occasionally it may come in the first song. More often in the third or fourth.

"But the singer knows unerringly when the point is reached. After that it is the singer's party. No matter what is sung to them, they cry out for more. They are held entranced.

"But if you look at the artist, you will see that it is not all one-sided. The audience holds him entranced, too. He is giving them not only his voice, which is

### Prescribe FITCHMUL as a BRONCHIAL SEDATIVE EXPECTORANT—VEHICLE

*It's Formula Assures It's Efficacy!*

**FITCHMUL FORMULA:** Canadian Fir Balsam, Venice Turpentine, Chloric Ether, Hydrocyanic Acid (minute quantity) Tartar Emetic, Aromatic.

A physician's prescription which has been standard in hospitals, sanitariums and institutions a half century or more.

A full size bottle and the book, **FITCHMUL FACTS** will be sent free to any physician, on request.

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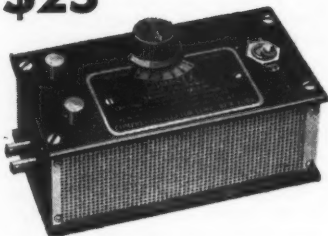
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**T**HE Comprex Cautery is adequate for all office cauterizations. A detailed technique for cervical cauterization is furnished with each instrument.

**C**OMPREX Cautery Guarantees range from five years to a lifetime. Why pay more?

**A**SK your dealer or write us for description of the new Leavenworth electrodes for cervical cauterization.



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trained to do his exact bidding, his artistry, the result of a lifetime of development, but also his very self—that personality with which nature endowed him. The singer who withholds this is 'just another singer.' His voice and technique may get him by, but he fails to achieve greatness."

I do not know how much thoughtful intrigue lay behind these remarks. They burned into my very soul. Perhaps they were intended to do so. Was I, after all, "just another doctor?" Had I been delivering to my patients the exact quantity and quality of skill that precisely matched my knowledge and ability? Was I allowing the scales, as between my patients and me, to come to a hairsplitting balance, while withholding that last ounce, ready in my hand, which would give them such obvious full weight?

I knew then for sure that the problem could not be solved by giving my patients a mere mechanical smile. The roots of it went down much deeper than that. Nor could I work out its solution alone. It must be worked out through a study of my patients and my relations with them, by the trial and error method.

Once more I hauled out my books, and, as best I could, I reviewed the history of each case I had handled and each patient I had served. I considered every one of them, and I did not complete the study in a day or a week. As I reached conclusions I wrote them down in a notebook. Outstanding among them was that there are two distinct kinds or characters of interest which a doctor should take in his patients, each of vital importance to both patient and doctor.

I had, I was convinced, been indulging in only one of them.

The young physician is taking his job of self-analysis seriously. His education will continue in November MEDICAL ECONOMICS.

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# The Doctor and His Investments

[FROM PAGE 34] begins to toboggan downward. When it reaches the point where margin calls have to be sent out widespread, many customers find they cannot protect their holdings. Their stock is summarily sold, adding to the holocaust.

After this, the bears step aside. They can now leave the stock to continue its decline under the impetus of continued selling. Lower and lower goes the price. A second margin call goes out. This time the response is weaker. More stock is sold. The price sags still further.

And so the avalanche increases until hundreds of marginal holders of the stock, forced to sell out their shares, are punished in the mad race to withdraw before everything is lost.

Then the professional bear and his cohorts step in again. They cover their short sales at a mere fraction of the former top price of the stock.

Afterwards, when the shares begin their climb toward former levels, the marginal speculator is left alone—to wonder what it was all about. Throughout the fray he has lost sight of the fact that, with slender resources, he was playing against interests that controlled millions.

One of his greatest illusions is that conservative margins will tide him over a serious break in the market.

Does he remember that the 1929 crash lopped 182 points off the industrial averages in a few days? Does he remember that, at the time, even holders of conservative marginal accounts were requested to put up additional capital to protect their interests? No. These and similar facts he does not, or will not, recall.

Buying stocks on margin often

## From the Lofoten Fisheries

in Arctic Seas to the bottled product your patient buys, the Nason organization protects the quality of



## Nason's Palatable ~ Lofoten Cod Liver Oil



every step of the way. You can confidently recommend

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### PLEASANT FLAVOR

Send  
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NASON'S VITAMIN POTENCY WARRANTY  
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PER GRAM OF OIL

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Kendall Square Station, Boston, Mass.  
Pharmaceutical Manufacturers to the  
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Pharmacy since 1905.

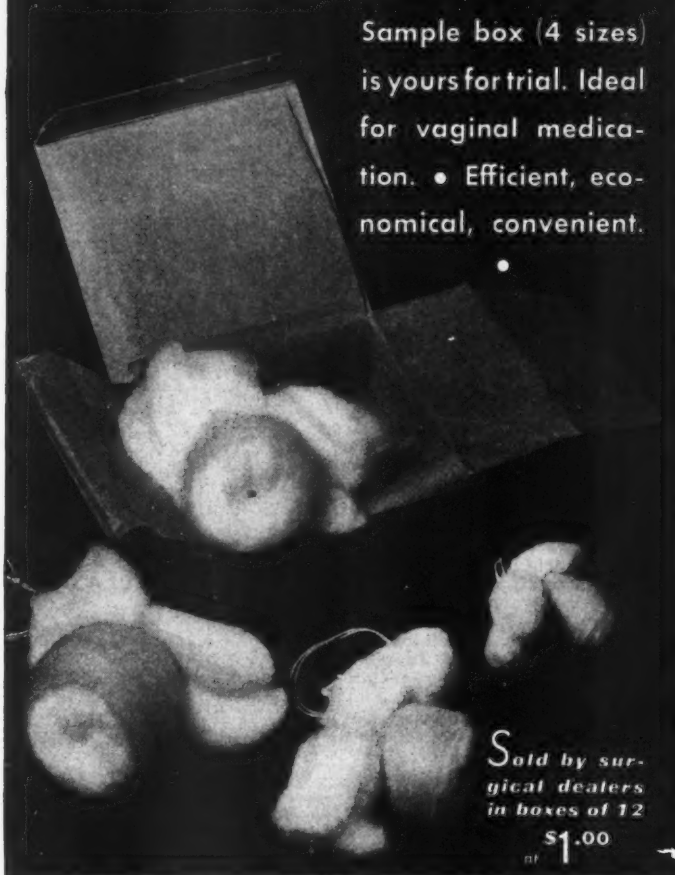
Gentlemen: You may send me (without charge) sample bottle of Nason's Palatable Cod Liver Oil.

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My Druggist's Name.....

(M.E. 10-32)

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Sample box (4 sizes)  
is yours for trial. Ideal  
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means financial suicide. For the professional man of moderate means there is only one way to buy. *Buy outright.*

Henceforward, on every improvement in the market, I would urge readers of **MEDICAL ECONOMICS** to liquidate marginal accounts, retaining the proceeds in cash, in order to buy outright, as soon as conditions warrant, securities of merit and sound prospects. The opportune time for re-entering the market, as soon as it arrives, will be indicated in these pages.

## Current Policy for Investors

**B**ECAUSE of intermittent, spectacular rises in the stock and secondary bond markets during September, many investors lost sight of the fact that, beneath it all, a well-defined reaction was taking place, during which much of the ground gained in the course of the month was lost. A majority of the *reliable* security price indices now point to *further* setbacks in these markets during forthcoming weeks.

It can scarcely be doubted that the market is hovering around the long-awaited bottom; nevertheless, to plunge headlong into stocks now, before a *sustained* recovery appears in prospect, is to court disaster. Recovery, to be sustained, must have as its foundation the confidence of the public, and a general betterment in our entire business structure—not the inconsistent improvement in scattered, small industries which has come about of late.

Improvement, it is true, has been displayed in the textile and related industries; but, for the most part, evidence of recovery has been spotty and unimpressive. Unpromising news continues to come from many of the heavy industries. Operations of steel

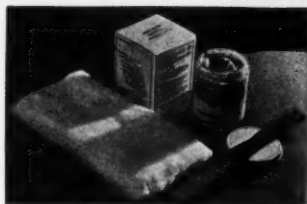
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## The Pendulum Swings Back

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For several years poultices and plasters have been largely out of favor with the doctor. But now they are "coming back," because the physician is finding in a certain type of plaster or emplastrum a means of concentrating his medicinal action over the affected area.

This is effected by making the cataplast the vehicle for active medicinal agents which are quickly absorbed through the skin—so the term "Cataplast Plus" has been applied to

## NUMOTIZINE

because it is a cataplast of kaolin which contains guaiacol and beechwood creosote.

Applied to the skin, these medicinal agents with a well known action are absorbed over a period of time so that the patient has the benefit of prolonged action without gastric disturbance or nausea. The drug effect is not wasted, but is concentrated topically, over the area being treated.

The clinical efficacy of Numotizine is swinging back the pendulum, and bringing the emplastrum into favor for the relief of local pain and congestion, as well as for the reduction of fever temperature.

*Sample and literature on request.*

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*Easy  
to  
Dispense*



*Easy  
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Swallow*

## An Aid in Re-establishing Normal Intestinal Function

Ideally suited to the procedure advocated  
by Fantus, of re-establishing normal  
functions through the administration of  
*descending* dosages.

### Constituents and Action

**OXGALL**—The bile is the only reliable chologogue known. In the liver it increases the secretion of both the liquids and solids of the bile. (Cushny.)

**PHENOLPHTHALEIN**—A mildly acting cathartic . . . producing large, soft discharges without much griping. (U. S. Disp.)

**CASCARA**—Not only increases the secretions of the gastro-intestinal canal, but because of its bitterness acts as a tonic, improves appetite and digestion. (Gant.)

**ALOIN**—Its cathartic action is due to a stimulation of peristalsis, especially of the lower bowel . . . Many believe it possesses a direct tonic action . . . encouraging a restoration toward normal conditions. (U. S. Disp.)

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## Patients Gladly Wear BAUER & BLACK Elastic Stockings

These remarkable new stockings make all the difference in the world in the *attitude of the patient*. They are actually *sheer and good-looking*, light and comfortable.

That is because they are made of the sensational new Lastex yarn, a silk-covered elastic of such incredible fineness that it can be knit like pure silk thread into fabrics that *stretch all ways*, instead of only one way, as in the case of old-style elastic garments.

Bauer & Black Elastic Stockings give firm, self-adjusting support, without undue pressure at any point. They have proved eminently satisfactory in the treatment of varicose veins—relieving pain, reducing swelling, and assisting the healing of varicose ulcers.

These are the *only* elastic stockings made of the new, patented Lastex yarn. They are furnished for both men and women, in full length and knee length—obtainable *now* from your surgical supply house or through druggists. Mail the coupon for descriptive literature and clinical reports.

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mills are running rather consistently around 14 per cent of capacity, with orders conspicuous by their absence. Automobile output has declined to the lowest levels of the year. Average daily building contract awards during the two weeks' period ended September 24 slumped approximately 46 per cent below those reported in the corresponding period in 1931.

Even the general business activity indices reveal no appreciable gain, either actually or when compared with last year. Figures recently received, showing freight carloadings, the volume of checks cashed, electric power consumption, and commercial bank loans, manifest only slight seasonal changes, and fall short of 1931 figures in about the same degree as they did at the beginning of the summer.

In view of existing industrial conditions, the opportune time for making commitments in stocks and secondary bonds is clearly not yet at hand. Despite the fact that losses may be suffered by doing so, I recommend that present weak security holdings be liquidated during strong price rallies, and that new purchases be postponed until further notice in these pages. The sounder issues will be available again before long at more favorable levels.

As this issue of MEDICAL ECONOMICS goes to press, U. S. Government and other high-grade bonds, of types recommended in MEDICAL ECONOMICS for the past half year, are continuing their encouraging trend upward. Only last week, prices of several Gov-

ernment issues soared to new highs for the year.

It is not surprising, of course, that these first-quality bonds should have displayed such consistent firmness in the face of a generally adverse situation. Throughout 1932 they have constituted a last resort for thousands of investors and financial institutions who dared not place their funds in anything less than gilt-edged.

Furthermore, there is still a tremendous, potential demand for these issues—especially on the part of the interior banks. This demand is being held in check now; but with any relaxing of the present tension, it is bound to be felt as a gigantic force to send up prices. Interior banks have lost heavily on secondary bonds, and it is to be expected that during the initial stages of recovery these banks—the backbone of our national banking system—will concentrate their vast, united buying energies on the high-grade bond groups. Rising prices are the only possible consequence in this event.

Prominent among the high-grade security issues now available are a number of municipal and State bonds. The unremitting accumulation of municipals by investors desiring to increase their percentage of tax-exempt issues, has appreciably strengthened prices in the municipal market. This uptrend has been further accentuated by a lack of sufficient offerings, caused in turn by curtailed public borrowing. Supplies of bonds now held by dealers are

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of 15% Silver content. Positive action on gonococci, analgesic in the inflamed urethra, is not irritating and often shortens the period of treatment.

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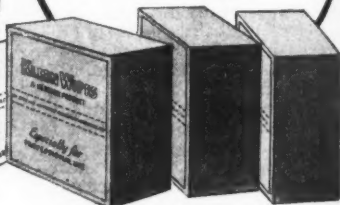
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1 doz. pkgs. 15" x 18" Kleenex at \$2.90



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3 pkgs. 5" x 9"  
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**T**HE greatest Kleenex offer ever made! With every dozen 15" x 18" Kleenex at the special professional prices you get **FREE** 3 packages of Kleen Wipes—disposable tissue like Kleenex in every respect except size. They are 5" x 9"—packed 136 to the box. Order now—while this remarkable offer lasts. You will also want the white metal wall cabinet to hold 15" x 18" Kleenex. It's **FREE**! Request when mailing order form below to your supply house.

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Gentlemen: Please send me Date.....

☐ 1 doz. Towel Size Kleenex (15" x 18") . \$2.90  
with 3 pkgs. Kleen Wipes **FREE**.

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(15" x 18") . \$7.95  
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estimated to total only about \$25,000,000, as contrasted with almost \$100,000,000 during normal times.

Further evidence to show that there is still ample room for appreciation in high-grade bonds may be found in the fact that the total of these holdings at the present time is some 700 millions below the top figures of last year.

Accordingly, I continue to believe that prime bonds of types recommended on page 32 have much to offer the investor. Present holdings of these issues should be retained in the proper proportions, and additional commitments taken on in moderate amounts and during pronounced market weakness.

I would not advise the physician to load himself too heavily even with bonds of the highest quality, however. Substantial cash reserves are highly advisable so that when the market definitely begins its long climb upward, advantage may be taken of the many favorable stock buying opportunities to be anticipated at that time.

## When to Listen

[FROM PAGE 29] A typical case will best explain this.

A man of forty, who had been away from home for several months, was notified of the extreme illness of his wife. Prior to this he had had financial worries; his own health had been the cause of some concern; he had been homesick and unhappy over his prolonged separation from his wife. She passed away shortly after his arrival. To remain in the house where he had longed so ardently to be, was now intolerable; so he at once returned to his temporary home, a few hundred miles away.

Back with his friends, his one great desire was to tell them all



## CHANGING THE COLON FLORA WITH A FOOD

**N**O cultures are needed, no acidophilus milk or buttermilk, no drugs or chemical laboratory products of any sort — just a food — a special food which supplies the right soil for the growth of the normal, benign acid-forming germs.

### LACTO-DEXTRIN

(Lactose 73%—Dextrine 25%)

Provides the right soil for the growth of the friendly, protective germs — the *B. acidophilus* and *B. bifidus*.

Lacto-Dextrin offers a carbohydrate food which acts in a natural way to suppress putrefaction and intestinal poisons by changing the flora.

A physician's sample of this "food with a medicinal effect" and full literature will gladly be sent with our compliments.

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Dept. ME 10-32, Battle Creek, Mich.

Send me, without obligation, literature and trial tin of Lacto-Dextrin.

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Address.....



## A "STANDBY" IN DERMATOLOGICAL PRACTICE

### BUT IT MUST BE MADE RIGHT

Medical literature abounds with references to the value of aluminum acetate as an astringent wet dressing in dermatological practice.

\* \* \*

In fact, it has been described as a "standby" and as invaluable in eczematous and other skin conditions; eye, ear, nose and throat affections; and pediatric practice (sore buttocks, milk rash, eczema, etc.).

\* \* \*

But for results, aluminum acetate must be properly prepared. The ordinary extemporaneous solutions won't do, since aluminum acetate is very difficultly soluble in water. Pusey and others emphasize that the true Burrow's Solution must be prepared and used as a colloidal suspension, made according to a definite chemical equation.

\* \* \*

That is the reason why Hydrosal (colloidal aluminum acetate) is proving so effective. It is prepared by chemists who specialize in this one field of manufacture.

\* \* \*

We want you to try Hydrosal in its two forms—liquid and ointment. Hydrosal (liquid) is obtainable in 4, 8 and 16-oz. bottles. Hydrosal Ointment is supplied in ½ and 2-oz. jars.

\* \* \*

Write for a supply of Hydrosal for clinical trial, as well as a copy of our new booklet "The Treatment of Skin Affections by Colloidal Aluminum Acetate."

\* \* \*



THE HYDROSAL CO., Dept. M. E. 10, Cincinnati, Ohio.

Send me, without obligation, literature and trial supply of ☐ Hydrosal Liquid, or ☐ Hydrosal Ointment. Check item desired.

Dr. ....  
Address .....

about it, to relieve his mind of the thoughts which had come crowding to torment him,

But no one would listen to him. They did not want to hear of his trouble and they plainly told him so. They were impatient, they ridiculed, but most often they showed their disinclination to listen to the story he had to tell. And, disappointed, he buried his longing as deeply as he could and—worried.

Four months later a physician friend came to make a social call. Shocked beyond words at the mental state of his friend, his first thought was to get away. "I'll come again," he explained. "I heard of Enid's death only a few days ago—wanted to get the details. But you won't want to talk of it now, so I'll come again."

To his surprise the man burst into a torrent of spasmodic weeping, out of which the doctor gathered that he wanted, of all things, to speak of his wife; wanted to with an intensity which was all but devastating him.

At this point one man in the room exclaimed loudly: "For Heaven's sake don't let him get on that subject! He'll go nutty if he does."

And a woman added: "All he wants to do is to talk about his wife. What good will that do? I just won't listen to him. Why should we be bothered? Its worry, worry, worry."

To which the patient replied: "I'm going to talk this thing out just once if it means losing your friendship forever."

And he did. The two men went into another room, where the sick man was encouraged to tell the whole tale. Little by little, all the disappointments, the inhibitions, the buried longings were brought to the surface and put into words. By the time the recital was over he was crying like a child and was as shaken as though he had come through a long illness. And through it all he had the sympathetic support of the doctor, who really was his savior.

A few times more he was encouraged to tell the tale, at intervals of a few days. But suddenly he no longer wanted to speak of it. The great desire had disappeared. There was no longer anything to tell. He was even beginning to weary a bit of it. The sympathetic, understanding manner in which his doctor friend had handled the situation, undoubtedly saved this man from a severe mental illness. From this time on he was entirely free of the moroseness, the worry, the nagging thoughts from which he had had no relief for months.

This manner of treating is not mushy sentimentality. From the time this man had returned to his friends he had been longing to tell someone, anyone, all about

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## **MICAJAH'S SUPPOSITORIES**

*Successfully prescribed for rectal trouble*

over a long period of years. Micajah's Suppositories meet the important indications for the treatment of fistula ani, proctitis, pruritis, and

### **HEMORRHOIDS**

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Do not wear out in effect. Do not arouse intolerance. Soothing. Healing. Non-irritating. Antiphlogistic. Samples and literature to physicians upon request. Mail this coupon NOW!

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## and Mineral Oil



**T**HOSE two reliable correctives, milk of magnesia and mineral oil, may now be prescribed in a doubly effective form. In Haley's M-O they are skillfully combined in a permanent emulsion that has proved unusually successful in the treatment of digestive disorders.

In Haley's M-O you have antacid, laxative and lubricant, all in one. It is a safe corrective for acidity and constipation. It has the advantage of causing no digestive disturbance, and taken in normal doses it causes no leakage.

Haley's M-O is nearly tasteless. Patients take it much more readily than less pleasant substitutes. It is used with excellent results for patients of all ages.

Haley's M-O is exceptionally useful in spastic constipation, intestinal stasis and auto-infection. It also serves well in gastro-intestinal hyperacidity, sour stomach, palpitation, heartburn, pyrosis, gastric or duodenal ulcer, intestinal indigestion, colitis, and hemorrhoids.

Also useful before and after pregnancy and maternity, in infancy, childhood, maturity and old age. An effective antacid mouthwash. Procurable at all druggists'.

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it. One physician whom he had consulted at the frantic advice of his harassed friends told him to get it off his mind or he would go insane. None knew better than he the truth of this. But how stop the tormenting thoughts? His friends were sick and tired of him and wanted to hear none of his troubles.

But this one friend, the doctor, at once set about putting something else in his mind, something to replace the thoughts which had just been released. He began to speak of the wife as he had known her when she was a girl. For hours he sat, telling little personal incidents which the other man absorbed as a dry sponge would a dash of warm water.

He finally ended with: "Do you know, that when she told me she was going to marry you I was jealous as the dickens."

He had put just the right thought into the man's mind. The wife was brought to him living, brought to him happy, doing the things which ordinary mortals do in the flesh, and not that which he had seen and was so pitifully anxious to relate. He could now think of her as related to happiness, to joy and life.

To be sure, every case does not respond so readily as this one did; nor is the cure always so rapid. But most cases are eventually solved.

Who, then, is the logical one to attempt a cure? It must be someone in whom the patient has faith and whom he trusts. This at once eliminates almost everybody; for, generally, the worrying patient trusts no one—*except his doctor, if the doctor will listen to him.*

Of course, there is psychoanalysis. But, for various reasons, this is not the ideal method to use in treating the worried patient. It is too complex, it takes too long, makes too much of the situation, often humiliates him;

## MAKE THIS TEST

Put 3 c.c. of water in tube. Drop in one FOMOS Tablet. A dense viscous foam immediately results. It is this process which makes FOMOS of such great value in its action in the vagina.



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# UNBIASED MEDICAL RESEARCH LABORATORY TESTS INHALANTS

*Establishes conclusion that Vapex is of definite value to relieve the distress of head-colds . . .*

*FIRST as a logical and natural means of treatment . . .*

*SECOND as an effective germicide.*

FOR TWO YEARS, The Medical Arts Laboratory of Jenkintown, Pennsylvania, has been making unbiased tests of inhalants for the relief of the common head-cold.

In clinical cases, definite alleviation of the distressing symptoms of coryza were noted on inhalation of the vapor from Vapex. The relief appeared to be more general over the total area of inflammation than occurred with gargles, salves, and nasal drops, largely due to the approximation of the inhalant-treatment to the natural function of the upper respiratory-tract.

Bacteriological tests on a strain of *Staphylococcus Aureus* furnished by the U. S. Department of Agriculture (the hardiest of the organisms usually proliferating in the nasal passages during the course of a cold) demonstrate the power of the vapor from .02cc of Vapex (one drop) to clear gelatin cultures of the organism solely by contact of the vapor. No other inhalant tested approached Vapex for germicidal potency.

The non-toxicity of the preparation was demonstrated by titration of Vapex into the conjunctiva of rabbits without irritation.

From these tests, it appears that Vapex can be of definite value to the physician to supplement his regular prescription for head-colds. The relief afforded the patient from distress and the definite germicidal value of the preparation recommend themselves.

Vapex is distributed in the United States by E. Fougere & Co., Inc., Distributors of Medicinal Products since 1849.

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It requires long seances—this word is used only figuratively—and is then not always successful.

Our patient has no particular complex, his trouble has not reached deeply into the subconscious; he is really not a subject for the specialist.

The scolding method we know to be absolutely useless. It only angers the patient, or starts him worrying over the fact that he has been scolded, which is merely another way of aggravating his entire condition. Reading, outside interests, visitors; all these means would be useful if the patient could be reasoned with, but unfortunately he cannot. It is impossible for him to concentrate sufficiently to read, to attend the theatre, or to do any of the things which the normal human does to relieve nerve tension.

Now we have for consideration, psychotherapy. By this we mean, in a general way, the use of that part of the human economy which is not physical. And surely it is logical to expect help from this quarter, since this particular state, worry, is not physical either. With this method the physician must do the actual work, or at least teach the patient how to do it, which amounts to the same thing.

First of all, the patient must know that his worried state is not considered trivial. He must feel the interest—and again I say that I am not confusing interest with sloppy sympathy—which his doctor has in him. That is essential to a cure.

Next there must be a certain amount of understanding on the part of the patient. He should at least be made aware of the *modus operandi*. In most cases the patient is more than willing to cooperate when he learns that he is to talk of himself and his symptoms. [TURN THE PAGE]

## BROMO ADONIS

*The Bromide of Greater Tolerance, Greater Potency, Wider Usefulness.*

Successfully used by the Medical Profession in the treatment of Epilepsy, Menstrual Disturbances, Spasmodic Neurosis.

*Bromo Adonis No. 1 . . . in Nervous Indigestion, Hysteria, Insomnia, etc.*

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*Check the preparation desired for free sample*  
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This NEW Davol  
ANTI-COLIC  
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has the SANI-  
TAB\* for safety and convenience.

Protects the sterilized rim of the nipple from contamination by finger and thumb when applying. Makes application easier. An exclusive feature of the genuine ANTI-COLIC brand 3 hole nipple.

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Davol Rubber Co., Dept. B10, Providence, R. I.  
Please send free samples of Sani-Tab Nipple and bottle cap.

Name .....  
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# Colitis *had developed from the indiscriminate use of Laxatives*

**A famous Gastro-Enterologist cites a typical Case History**

**A** VERY well-known gastro-enterologist, who is also the physician-in-chief of a large charity hospital, sends us the following case record:—

"The patient was a young woman, the mother of two children, in whom pregnancy had provoked the beginnings of constipation which became gradually worse. Aggravated by the exaggerated use of laxatives, it was occasionally complicated by painful colitis.

"This patient's constipation was corrected by means of yeast. After regular bowel movements had been re-established, a headache, so chronic it had become a virtual infirmity, disappeared."

Every practitioner can probably cite examples of the exaggerated use of purges and laxatives.

In many thousands of such cases the evils resulting have been successfully corrected by the addition to the diet of Fleischmann's Yeast.

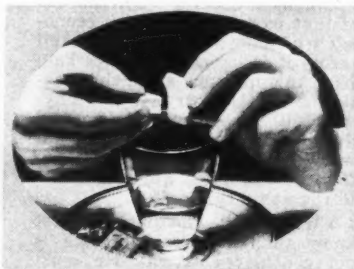
A food, Fleischmann's Yeast has a truly extraordinary tonic effect on sluggish intestines.

In addition, it stimulates the appetite and benefits digestion directly by bringing about an increased se-

cretion of the gastric juices. And it is in itself a highly nourishing adjunct to the diet, rich in high-grade proteins, phosphorus and calcium, and in vitamins B, G and D.

Physicians recommend three cakes of Fleischmann's fresh Yeast daily—a cake before each meal, or between meals and at bedtime—just plain, or dissolved in water (about a third of a glass).

Are you availing yourself of the help that Fleischmann's Yeast can be to you in your own practice?



Physicians recommend 3 cakes of Fleischmann's Yeast daily, in place of laxatives.

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And soon he has an understanding of what has brought about his condition, for he brings to the surface the shocks, troubles, griefs and fears which antedated his mental state. And right here is where psychotherapy becomes a system of re-education. The patient is taught how to lift his load of worry, apprehension and fear, layer by layer; and while he is so occupied the doctor must, by suggestion, replace it with healthy material. At this stage positive suggestion becomes the cure.

Did I hear someone say: "Oh, but that's hypnotism!"

Here is one thing to be borne in mind in this age of change: *The proof of a theory lies in its results.* Actually no importance can be attached to any method except as the results warrant. And what better proof have we of the immutability of scientific laws, than the ability to take our premises and prove them demonstrable.

We have here a man badly in need of help. Who is the logical healer for the sick mind? The patient's friends have been ruled out, his spiritual advisers do not meet his needs, the specialists in the field of psychiatry or psychoanalysis are too complex in their methods. Hence psychotherapy is deemed the proper system to employ—the physician to apply the treatment.

But now we come to an impasse. The patient needs the treatment, the physician is amply qualified to give it, but in the make-up of the human being there are obstructions with which to reckon.

Doctors, of all people on earth, are most loath to leave their particular field and venture into others. Very few doctors are really willing that their patients should have mental care. They wish to have nothing to do with mental healing unless it be one of the recognized branches of



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- Dryco is irradiated and contains the necessary protective amount of vitamin D.
- Mothers do not forget to give babies their feedings, though they easily might neglect to give them an added antirachitic agent.
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medical science. And most of them consider all mental healers as quacks.

As a matter of fact, most mental healers are earnest, honest truthseekers. Their methods may not be perfect; but then, neither are ours. Why should we alone remain materialists, earth-bound, when the whole age is one glorious, progressive march?

However, I maintain that mental healing should be in the hands of the physicians, that they should know how and when to apply this manner of healing, so they will be in position to use it intelligently when, in their practice, the need for it arises.

Everyone will agree that the physical body needs physical care. By the same token the mental body—as it were—needs mental care. One of the best surgeons I know of, whose operative successes seem at times almost miraculous, never objects to a mental practitioner seeing the patient both before and after the operation. He believes, and rightly, that physical repair is hastened if the mind is entirely at peace. Obviously, the physician should be in a position to minister to a sick mind, since the mind is certainly part of the patient, and a very important part.

And make no mistake, the patient will be all the more ready to trust his doctor, if he finds that he is able and ready to meet this contingency as he does all

others. I know just how the physician feels when John Doe comes dragging in, worry written all over his face. He knows exactly the words his patient will utter, is fully familiar with the age-old complaints, and can even visualize the discouraged, dejected expression Mr. Doe will present when he finds that there is no sympathy for him.

•

The doctor has heard it all so many times that his own mental state is sometimes in need of ministration. He has heard it *ad nauseum*. But even while he is wildly seeking some avenue of escape, he knows that the mental state must be cleared up before his medication will touch the physical man.

Sometimes, when we take these old complainers, these chronic worriers, and start all over as though they were new cases, by listening with an ear which has never heard the old story, the tale assumes a new interest, and the patient at once responds to the note of interest in our voice, in the voice of the only human being in whom he has confidence. Then is the time for suggestion, for hypnotism, if you will.

It is a tedious process, but a simple one and many times a sure one. It will keep your patients in your own hands.

So ask yourself: *Do I know when to listen?*

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Food Value: None

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# Literature and Samples »

**LACTOSE IN CONSTIPATION**, a reprint which gives dosage instructions for the use of lactose in constipation, may be obtained by any member of the profession by writing to National Milk Sugar Co., Inc. (ME Item 10-32), 205 West 42nd St., New York.

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**THE FOOD OF THE INFANT AND GROWING CHILD**, a booklet for mothers, giving general instructions and no formulas, is available without charge from the Corn Products Refining Company (ME Item 10-32), 17 Battery Place, New York.

**TREATMENT OF ANEMIAS** is the title of a leaflet discussing Ferro-Cu-Mang, a product for oral, intravenous, and intramuscular use. Free copies may be had from the Drug Products Co., Inc. (ME Item 10-32), 26-32 Skillman Ave., Long Island City, N. Y.

**SAMPLES OF MAZON AND MAZON SOAP** will be mailed gratis for clinical test, by the Belmont Laboratories, Inc. (ME Item 10-32), 4430 Chestnut St., Philadelphia, Pa.

**SAMPLES OF TOLYSIN**, indicated in the treatment of acute rheumatic fever, may be had upon request to the Calco Chemical Co. (ME Item 10-32), Bound Brook, N. J.

**DE BERRI'S AUTOMATIC COLONIC IRRIGATOR** may be regulated for each patient, and requires no attention after once being started. For descriptive folder, address Dr. E. M. De Berri (ME Item 10-32), 28 W. 47th St., New York.

**TERPAL**, an agent for the prevention and treatment of the common cold, is described in a folder offered by Lederle Laboratories, Inc. (ME Item 10-32), 511 Fifth Ave., New York.

**COMPLIMENTARY PACKAGES OF SARAKA**, for the treatment of habitual constipation, will be sent to physicians by the Schering Corp. (ME Item 10-32), 15 West St., New York.

**NUPERCAINE "CIBA,"** referred to as "a local anesthetic of prolonged action," is exhaustively discussed in a free booklet offered to physicians by the Ciba Co., Inc. (ME Item 10-32), Morton & Greenwich Sts., New York.

**A TRIAL SUPPLY OF BET-U-LOL**, for treating rheumatism, neuritis, and related pains, is offered to physicians by the Huxley Laboratories, Inc. (ME Item 10-32), 175 Varick St., New York.

**PROFESSIONAL PACKAGES OF CAMPHRO-SALYL AMPOULES**, for the treatment of cardiac, rheumatic, and similar pains, are offered to members of the profession by E. Fougere & Co., Inc. (ME Item 10-32), 75 Varick St., New York.

**SAMPLES OF TONGALINE**, for the relief of lumbago, rheumatism, and arthritis, may be secured without charge from the Mellier Drug Co. (ME Item 10-32), 2112 Locust St., St. Louis, Mo.

**KAOSYL**, a product indicated in the treatment of hyperacidity, gastric ulcers, intestinal stasis, etc., is completely described in a leaflet offered gratis to physicians by the Columbus Pharmacal Co. (ME Item 10-32), Columbus, Ohio.

**INTRODUCTORY SAMPLES OF URASAL** are available upon request. This product is indicated for supplementary medication in rheumatic infection, and for specific medication in urinary tract infection. Write: Frank W. Horner, Inc. (ME Item 10-32), Lynn, Mass.

**SAMPLES OF RIODINE ASTIER**, an organic, assimilable iodine, are offered to physicians free, together with a descriptive leaflet. Address requests to the Gallia Laboratories, Inc. (ME Item 10-32), 460 Seventh Ave., New York.

**GUARANTEED FIRST MORTGAGE CERTIFICATES**, covering New York real estate properties, are described in a

**Editor's Note:** These brevities are listed as a service to our readers. It will facilitate the handling of your request, when writing manufacturers, if you will include "ME Item 10-32" as part of the address.

SEND FOR YOUR **FREE SAMPLES**  
*of these two popular*

# Z.B.T.

## BABY PRODUCTS

WE want you to make a thorough test of Z. B. T. Baby Talcum and Z. B. T. Olive Oil Baby Cream . . . to discover for yourself why these two preparations are endorsed so enthusiastically by the nation's leading doctors and nurses. Scientifically compounded according to the formulae of a nationally-known pediatrician, both of these Z. B. T. products are made of the purest ingredients obtainable. A request on your professional stationery will bring you a generous Free Sample of each for trial purposes.



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### BABY TALCUM

This mildly-medicated compound talc is superfine and uniform in texture. Free from lime, mica or other harsh abrasives, Z. B. T. is so soothing and healing that it may be used with perfect safety on even the most sensitive skin. Z. B. T. neutralizes the acidity of perspiration and urine and prevents friction and chafing.

The new 12-ounce Hospital Size Can is now in great demand everywhere.

## Z. B. T.

### Olive Oil BABY CREAM

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Put up in generous-size individual jars and in bulk for hospital use.

*Fine for Baby's Body . . . Fine for Everybody!*

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pamphlet offered to physicians by the Title Guarantee and Trust Company (ME Item 10-32), 176 Broadway, New York.

**ENCYCLOPEDIA OF DIAGNOSIS OF NERVOUS AND MENTAL DISEASES.** An epitomized work on diagnosis, almost 300 pages in length, is offered free to members of the medical profession by the Od Peacock Sultan Co. (ME Item 10-32), St. Louis, Mo.

**SAMPLES OF MELLINGER'S MASK** are available free to physicians. The mask fits any face, covers nose and mouth, prevents steaming of glasses, is translucent, impermeable, and easily sterilized. Address requests to Mellinger's Mask (ME Item 10-32), 4607 Melrose Ave., Los Angeles.

**SAMPLES OF SIMILAC:** Literature describing the action of this infant food, with samples for clinical trial, is offered physicians writing on their prescription blank, by M & R Dietetic Laboratories, Inc. (ME Item 10-32), Columbus, Ohio.

**THE HOLLAND-RANTOS VAGINAL DIAPHRAGM AND KOROMEX** are described in a reprint bearing the same title. Copies are offered free to physicians by the Holland-Rantos Company, Inc. (ME Item 10-32), 37 East 18th St., New York, N. Y.

**SMA NEWS:** This miniature newspaper, printed every now and then, carries items of current interest to physicians, and is worth writing for if you do not already receive it. A trial supply of S.M.A. is also offered. Write: S.M.A. Corporation (ME Item 10-32), Cleveland, Ohio.

**MASTODONS, MICROBES, & MAN:** Here is the title of a booklet by W. W. Peter, M.D., published as part of the health service of Cleanliness Institute and designed for laity instruction on the dangers of micro-organisms and the benefits of biological cleanliness. Single copies are available to physicians without charge. Write the Cleanliness Institute (ME Item 10-32), 45 East 17th Street, New York.

**SAMPLES OF CERTIFOODS:** Professional samples with vitamin and assay report are available without charge. Direct requests to Certifooods, Inc. (ME Item 10-32), 30 Vesey Street, New York.

**SAMPLES OF VIM HYPODERMIC NEEDLES:** You may send for one of these stainless steel needles (with the square hub). It will be forwarded, together with a copy of the monograph "New Advances in Technique." Both are complimentary. Write: MacGregor Instrument Company (ME Item 10-32), Needham, Mass.



**I slept, Doctor,  
ever so much better,  
and without any  
sleeping medicine**

This might be any of your patients with "irritable bladder," cystitis, or an inflammatory condition along the urinary tract leading to frequency, tenesmus, burning.

The most important function of  
**SANMETTO**

is to soothe the urinary tract. Of course, it also stimulates healing and creates a condition of the Mucosa unfavorable to further bacterial development.

But today we urge you—

**Prescribe SANMETTO  
TO RELIEVE URINARY  
TRACT PAIN AND DIS-  
COMFORT.**

Your patient's report will be gratifying.

**OD PEACOCK SULTAN  
COMPANY**

Pharmaceutical Chemists

4500 Parkview Place,  
St. Louis, U.S.A.





**For Uric Acid Retention  
and Urinary Lithiasis  
CYSTOGEN-LITHIA**

Cystogen-Lithia is an effervescent tablet containing equal parts of hexamethylene tetramine and lithium tartrate. Its administration is indicated in cases of uric acid retention and urinary lithiasis because of its duofold action as an antiseptic and uric acid solvent.

Cystogen alone is effective in acid media and its use in Crystalline Tablet form is therefore indicated in the treatment of phosphatic calculus and of phosphaturia. With a uric acid diathesis, Cystogen-Lithia should be given.

*Your patient can secure  
Cystogen only on your pre-  
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advertised only to the profession.*

**CYSTOGEN CHEMICAL CO.,  
220 36th St., Brooklyn, N. Y.**

Please send me professional sam-  
ples of Cystogen and literature.

Dr. \_\_\_\_\_

Address \_\_\_\_\_

ME 10-32

## Visible Records

[FROM PAGE 25] account is finally paid in full, and treatment completed, the card is withdrawn from the tray and placed in the inactive file. Colored signals are removed for use elsewhere.

Because of its compactness, the visible record system allows a considerable saving in time. Both telephone and personal calls are handled twice as quickly as under the old system which necessitated looking up the ledger card in one file, the case history card in another, and then thumbing over whatever record books contained additional data on the case.

When referring to the visible file, merely a flip of the metal frame card holder and a glance at the card are required to provide the desired information. The signal tabs comprise an accurate, handy barometer, since they show both the specific and the general trends of the business end of the doctor's practice.

Besides being time-saving, visible records are labor-saving. In a busy office which would normally require the services of two assistants, the visible system will usually enable a single girl to take care of the account records, answer telephone calls, make appointments, and obtain such information from patients as may be required. Further efficiency may be had from this installation by using index letters on the front of each tray to indicate the alphabetical range of cards therein.

The visible record system is so flexible by nature that it may easily be adapted to the special needs of each user. A number of doctors, for example, instead of having red tabs inserted for each billing date, employ additional blockings at the bottom of the



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# Stubborn Eczema



now yields readily to  
**TREATMENT**

Inoton, prepared according to the formula of Dr. Francois Debat of Paris, formerly Chief of the Dermatological Laboratory of L'Hôpital Saint Antoine, offers a remarkably soothing and therapeutically effective application for the treatment of the various dermatoses.

Inoton contains, in active combination, the following ingredients: lithol (hypersulphonated oil of

schiste), ammonium ichthyol sulphionate, extract of witch hazel, titanium oxide, colloidal ortho-titanic hydroxide, zinc oxide and sodium borate.

Please send us your name and address for a complimentary tube of Inoton. Try it in your most stubborn case of eczema, pruritus, ulcers, irritable fissures or other dermatoses, and see the results for yourself.



# Inoton

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# MAZON

## Modernizes Dermal Therapy

COMPLETE RAPID ABSORPTION

IMMEDIATE PRURITIC RELIEF

EASE OF APPLICATION

BANDAGE ELIMINATION

POSITIVE RESULTS



Duration—2½ years



Complete elimination 2 months

## PSORIASIS

NO RECURRENCE—17 MONTHS

“One picture is worth a thousand words.”

The photographs on this and the following pages tell more about Mazon than any statement we could make.

The results are typical of those achieved in many cases, the majority of which had previously resisted other treatments.

Photographs used in this advertisement are authentic.

MAZON . . .



Duration—22 years



Complete elimination 10 weeks

**PSORIASIS**

NO RECURRENCE—15 MONTHS

**INDICATIONS**

ECZEMA	ACNE
PSORIASIS	TINEA SYCOSIS
ALOPECIA	DANDRUFF
RING WORM	ATHLETE'S FOOT

AND OTHER SKIN CONDITIONS

NO RECURRENCE—18 MONTHS

**PSORIASIS**

Complete elimination 2 months



Duration—15 years



**CONVENIENT TO**

# NOT A SMEAR



Duration—21 years



**PSORIASIS**  
**NO RECURRENCE—5 YEARS**

Complete elimination 3 months

## CASE STUDY BELOW:

**Diagnosis:** Physicians have diagnosed this condition as Eczema, Psoriasis, scabies, starch poison.

**Previous treatment:** Lotions, ointments, violet ray and mineral baths.

**July 29, 1932:** Photograph at lower left shows condition when treatment was started with Mazon and Mazon Soap.

**August 23, 1932:** Photograph at right shows improvement after **TWENTY-FOUR DAYS** treatment with Mazon and Mazon Soap.

Patient was continuing Mazon treatment when this advertisement went to press.

**DURATION—21 YEARS**  
**CALIFORNIA STATE LIBRARY**



# TO APPLY

# MAZON

## FOR ECZEMA

### Infantile Eczema



*responds more quickly  
to Mazon treatment*

#### We quote a physician:

"I used the sample of Mazon and Mazon Soap you sent me on my little four year old daughter who has had eczema on her face and hands almost since birth on. It cleared her skin as though by magic."

Mazon is a combination of Phenolic substances and organic mercury compound in a greaseless base.

Mazon was perfected after lengthy research in a large hospital in Philadelphia with collaboration of the clinical and pharmaceutical departments.

#### SUBSTITUTION

The success of any article encourages substitutes. Insist upon the original.

THERE IS NO SUBSTITUTE FOR  
MAZON

### MAZON SOAP

a perfectly balanced and absolutely pure soap, cleanses and prepares the skin for the absorption of Mazon. Physicians find it an ideal soap for office use.

That physicians may demonstrate for themselves our claims in behalf of Mazon and Mazon Soap we offer samples for personal clinical tests.

THE CARD ATTACHED REQUIRES NO POSTAGE

Exclusive manufacturers

BELMONT LABORATORIES, Inc.

4430 Chestnut Street, Philadelphia, Pa.

Sold by  
Dependable pharmacies

Dispensed in  
1-2-4 oz. sizes

Distributed by  
Wholesale Druggists

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# NEO-LACMANESE

*is the name of the "non-specific protein" preparation that brings...*

**NO BULK**

**NO PAIN**

**LITTLE OR NO REACTION**



*in overcoming infections*

Neo-Lacmanese is a true solution of milk proteins and manganese butyrate, in 1 cc. ampoules. It provides not one, but a group of antigens in its proteins and colloidal metal to stimulate varied antibody production. It may be injected for convenience, in the deltoid muscles of the arm.

The rapid response of many infectious conditions with freedom from objectionable qualities, places Neo-Lacmanese among outstanding medicaments.

Orders supplied quickly from any of the offices listed below.

**GEORGE A. BREON & CO., Inc.**

*Pharmaceutical Chemists*  
**KANSAS CITY, MISSOURI**

**NEW YORK**  
319 W. 50th St.

**SAN FRANCISCO**  
830 Market Street

**ATLANTA**  
218 Rhodes Bldg.

**PORTLAND**  
171 East 37th St.

**SEATTLE**  
6035 8th Ave., N. E.

**LOS ANGELES**  
2050 N. New Hampshire

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membering" is done for him, automatically.

The psychological element is also deserving of consideration. Any patient is flattered to find his physician well informed about his ailments of past years. Moreover, the physician *can* make himself informed and *can* win incalculable good-will if he will only take the trouble to refresh his mind on each patient's history before going into consultation with him.

•

To return now for a few moments to the record cards, let us consider the following pointers in filling them out.

Much time can be saved by the busy physician if he trains himself in the use of the check system. In other words, certain facts which are to be ascertained from every patient, and which are printed on the cards, need merely be checked. Naturally, it is a mistake to use the check too frequently, thereby sacrificing important details. The medical story of the patient should be in sequence, smooth, and clearly related. Checks, or plus and zero marks, may be used to advantage after certain individual symptoms.

If laboratory records are to be made out, a portion of the record card, when it is first being designed, should be reserved for this purpose. When making examinations in the laboratory, the card ought to be at hand there and the record made on it at the time. Doing this will save the unnecessary copying and confusion that arises when many small reports made out in hit-or-miss fashion in the laboratory must later be copied on the record cards.

If X-ray records are to be kept, provision for them should also be made on the card when it is being designed. Here again, a great deal of time can be saved by the judicious use of checks, although,

## DO YOU KNOW?

What brought on previous great depressions and how they were cured?

Why did this country fare so badly through foreign investments?

What significance have war debts and reparations?

Can inflation bring about relief?

Can business cycles be controlled?

What is the outlook for democracy?

## The Answers . . .

to the foregoing questions—and hundreds of others will be found in that commendable and clearly written work by—

**LLOYD M. GRAVES—**  
"THE GREAT DEPRESSION,  
AND BEYOND"

The Brookmire Economic Service, Inc.,  
351 Fifth Avenue, New York, N. Y.  
Gentlemen: Please send me.....copies  
(price \$2.00 per copy) of "The Great  
Depression and Beyond" for which there  
is enclosed \$.....

Name .....

Address .....

Town and State.....

ME 36

# A delicious food-drink for high-calory feeding



## Fortified by Vitamin D

Licensed by the  
**Wisconsin Alumni  
Research  
Foundation**

**C**OCOMALT mixed with milk meets the requirements for a delicious, high-calory liquid food. Especially recommended during pregnancy and lactation, during illness and convalescence—and for malnourished, underweight children.

For Cocomalt, prepared according to directions, adds 110 extra calories to a glass of milk—increasing its food-energy value more than 70%. This chocolate flavor food-drink provides extra proteins, carbohydrates and minerals (calcium and phosphorus).

Cocomalt is licensed by Wisconsin Alumni Research Foundation. It contains not less than 30 Steenbock (300 ADMA) units of Vitamin D per ounce—the amount used to make one glass or cup of this delicious, nourishing food-drink.

Comes in powder form, easy to

mix with milk. It is equally delicious served HOT or COLD. Children love it—convalescents enjoy it. Easily digested—quickly assimilated. Comes in ½-lb., 1-lb. and special 5-lb. family or hospital size, at grocers and drug stores. High in food value—low in cost.



ACCEPTED BY THE  
AMERICAN  
MEDICAL  
ASSOCIATION

### Free to Physicians

We will be glad to send you a trial can of Cocomalt free. Just mail this coupon

# Cocomalt

Cocomalt is a scientific food concentrate of selected cocoa, barley malt extract, partially defatted milk, sugar, eggs, flavoring and added Vitamin D.

R. B. DAVIS CO., Dept. 298,  
Hoboken, N. J.

Please send me, without charge, a full-sized can of Cocomalt.

Name .....

Address .....

City..... State.....

as said before, the use of these should not be over-extended.

Several other details should be attended to before the history section of the card may be considered complete. It will be noted that on the cards illustrated, there appear the printed words, "Referred by." Although many a physician neglects to keep a record of those who refer patients to him, the importance of doing this can not be over-estimated. In the case of the specialist, in particular, this feature should be carefully taken care of, since it may be a preventive of much needless embarrassment later on.

When the patient has been referred by another doctor, it is absolutely essential that this doctor be sent an acknowledgement and a report of findings. After this is done, the space should be checked to show that it has not been overlooked.

Should the patient have been referred by another patient, a courteous letter of thanks shows appreciation and is very apt to be followed by like recommendations in the future.

Some physicians even go so far as to keep a cross-index of physicians who have referred cases to them. This cross-index serves two major purposes. If it is desired to inquire as to the outcome of treatments and subsequent histories of patients, the doctor can go straight down the list. Again, if he forgets the name of some patient whose history he wishes to look up, he may remember who referred the patient to him. By looking through the physicians' tray, he may recognize the name.

Two other cross-indices may be kept which will be of value to the practitioner, whether general or specialist. The first is an index of diagnoses, the second an index of special procedures, such as operations. A separate card file is kept, arranged in alphabetical order.

For example, we have a card headed "Appendectomy," on which are listed, John Smith, No. 3211;

# Benzoinol

Used 43 Years  
for treating Diseases  
of Nose and Throat

A highly refined and purified petroleum product in which Gum Benzoin has been incorporated by our special process.

Benzoinol is supplied **PLAIN** and in various combinations.

These preparations greatly extend the field of indications for Benzoinol. They are made with special care in our laboratory, according to formulas of recognized therapeutic efficiency, and their constituents are of high chemical purity and reliability. The variety of combinations permits of a wide choice according to the requirements of the individual case.

Benzoinol **PLAIN** can now be obtained in handy form, in 1 oz. bottles with droppers, at all leading Drug Stores.

LITERATURE ON REQUEST

Schieffelin & Co., Selling Agents  
16-26 Cooper Square, New York

Made by **BENZINOL MFG. CO.**  
90 West St., New York

## Prescribe

**EFEMIST**  
HART'S INHALANT

For  
**COLDS**



It combats the  
cause as well as  
the subjective  
symptoms.

Try a bottle  
at our expense

HART DRUG CORP.,  
35 S. W. 2nd St., Miami, Florida.

Please send me free bottle of  
Efemist.

M.D.

Send for your sample of

# BET-U-LOL

*The Versatile Weapon*

Widely used as a topical analgesic and counter-irritant for the relief of rheumatic pains, neuritis, myalgia, etc., it has also been found effective in less obvious fields:

•  
As an application to relieve the congestive leg pains in late pregnancy...

To inhibit parasitic infection of the feet...

To relieve pain and inflammation in hallux valgus...

Applications of BET-U-LOL preceding and following diathermy increase the effectiveness of both therapeutic measures.

•  
We appreciate the interest shown in our product by those physicians who called to our attention the above uses for

BET-U-LOL

THE HUXLEY LABORATORIES, Inc.,  
175 Varick Street, New York, New York.

Gentlemen: Please send me a sample of Bet-U-Lol.

October

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Tom Smith, No. 3261; or "Gastric Ulcer"—Mrs. Smith, No. 6862.

The cross-indices make it possible at any time to ascertain how many cases of a certain disease have been treated and how many operations of a certain kind have been performed. If a paper is contemplated on a certain subject, all cases are immediately accessible through the cross-index, together with the key-numbers to the histories.

A good deal of this recording sounds formidable. And it would be a tremendous task if done all at one time. But for the physician to whom complete records are important, the system outlined is essentially easy to keep going once it has been started.

If the physician refuses to keep comprehensive records, he must at least keep brief records containing the principal facts. His ledger recordings are essential, since the income tax laws require "a solemn declaration of a complete and true statement of the declarer's income, profits, and gains, together with a true statement of exemptions and deductions."

It is unfortunately true that Internal Revenue officers frequently find doctors' income tax reports defective. Moreover, they often find it necessary to cancel deductions because such deductions cannot be substantiated by accurate or available records.

The number of physicians in the United States who could at a moment's notice produce an accurate statement of their assets and liabilities is undoubtedly small.

If all the words that are wasted by both doctors and patients, simply because the information taken at the first visit is not recorded, were combined and written down, they would fill volumes without end.

For this reason, it is far better to maintain a phenomenal record system than to attempt to maintain a phenomenal memory. If you work with associates, your phenomenal memory will not always help them. Your card system will.

If we review now the advantages of the visible record system, must we not admit that it has a good many?

Consider the "finger-tip" control it affords over billing and collections. Think of the ease with which it allows patient calls to be followed up. Consider its quick reference convenience, its flexibility and compactness of arrangement, and the labor-saving it permits when taking down items of information. The last feature alone saves the doctor's own time, saves repetition on the part of the patient, and registers a decidedly better business impression.

CANNOT RUST - CANNOT STAIN - CANNOT TARNISH



GOLD SEAL Hypodermic Needles are made of seamless Allegheny Metal tubing that is guaranteed non-corrosive (rustless and stainless) under all usual conditions, and guaranteed not to break off or leak. The points are sharpened and honed to razor edge and will stay sharp. The patented wing hub facilitates putting on and tightening and taking off the syringe tip.

CLAY - ADAMS CO.  
117 E. 24th St., N. Y.



WRITE FOR FREE NEEDLE  $\frac{1}{16}$ " - 25 G

# No half-way measures

meet the demands of pain.

Relief must be given and  
with the highest de-  
gree of safety.

*with*

# PAPINE

(BATTLE)

satisfactory control of pain is secured. While offering a maximum of opiate influence, PAPINE (Battle) has a minimum of objectionable features, it does not lock up the normal secretions.

**PAPINE (Battle) in pain**

**IODIA—ECTHOL—BROMIDIA**

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**BATTLE & COMPANY**

**Chemists' Corporation**

**St. Louis, Mo.**



## Speaking Frankly

FROM PAGE 7]

calling to exert ourselves with the general problems of the profession. More power to you! W. E. Hayes, M.D.

**Upper-cuts** TO THE EDITOR: I am sending you the back numbers of MEDICAL ECONOMICS which you requested for the New York Public Library.

I am glad to return, in this small way, a little of the real satisfaction I get from your publication. I read every number, and, while I do not always agree with everything written, I thoroughly enjoy it. The fact that I save back numbers shows what I think of MEDICAL ECONOMICS. Please continue with me right and left upper-cuts!

B. A. Smillie, M.D.

**Follow-up** TO THE EDITOR: I was greatly impressed with the article "Follow-Up," by Harold Stevens, in September MEDICAL ECONOMICS. For some months I have been a firm believer in advising patients about health examinations, but have never gone into the matter in a systematic way. My county society is in entire accord with the idea of communicating health advice and letters to patients.

Let me take this opportunity to congratulate the editors of MEDICAL ECONOMICS. I think it is the most practical publication ever brought to the attention of the profession and no doctor should be without it.

Myron L. Hafer, M.D.

**Refraction** TO THE EDITOR: Dr. H. S., who answered me in September MEDICAL ECONOMICS, is evidently now actively engaged in refractive work.

It is apparent that his information regarding optometry is based on the requirements of some time ago. Does he realize the changes in requirements for licenses in optometry today, changes quite as extensive as those which have taken place in the requirements for a medical license?

Dr. H. S. admits that "some optometrists do quite creditable work as far as refraction goes." It was my intention to confine the discussion to refraction. It is true that the optometrist is not skilled in the treatment of diseased conditions, nor do they claim to be. That belongs to the field of ophthalmology and should never be taken from that branch of science. Optometrists are trained to know these conditions and to refer them to the proper specialist. We are not remotely interested in the treatment of the eye from that standpoint.

The physician and the optometrist each has his place in relation to the eye, and can cooperate for the benefit of the patient.

George R. Miser

## Dyspepsia

R<sub>x</sub>

## Kaylene-ol

1 or 2 teaspoons half  
hour before meals

**T**HERE are two difficulties common to most dyspepsias—an irritated mucous membrane and some difficulty in evacuation of the stomach or duodenum.

Obstruction by pyloric spasm will originate a purely gastric syndrome but obstruction near the outlet of the duodenum will produce either true duodenal ileus or a similar if somewhat less clearly defined type of indigestion.

No matter what the precise site of the obstruction may be, one or two teaspoons of Kaylene-ol taken half an hour before each meal will, by lubrication, compensate for the narrowness of the passage.

By the same means the mucous membrane receives mechanical protection and is soothed. The Kaylene in the preparation adsorbs the toxic matter, which by irritating the inflamed surfaces would inhibit their repair.

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Arheol is the refined active principle of sandalwood oil. It is all sesquiterpenic alcohol, containing never less than 98% of santalol. Thus the uncertainty and unreliability of sandalwood oil therapy is eliminated when Arheol is used. It is free from the irritating substances which in ordinary sandalwood oil cause urinary or gastro-intestinal disturbances.

*Use Arheol for Gonorrhea (all stages), Cystitis, Vesical Catarrh, Prostatitis, Posterior Urethritis, Pyelitis, Pyelonephritis.*

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### *Without Iodism*

The problem of how to administer iodine medication with the assurance that your patient will escape the usual iodine disturbances is solved for you by the use of Riodyne.

Riodyne is a 66% solution in oil of an iodized glyceric ether of ricinoleic acid and contains about 17% of iodine, that is, in a form which gives maximum results with minimum dosage.

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The average retention time of iodine in the body when Riodyne is used is about 72 hours, or nearly double the retention time when using potassium iodide.

Prescribe Riodyne wherever iodides are required, especially where the iodides are not well tolerated. *Use it in Cardio-Renal Conditions, Chronic Bronchitis, Arterio-Sclerosis, Bronchial Asthma, Latent Syphilis, Lead Poisoning, Hypothyroidism, Simple Goiter, Obesity.*

# Tours and Cruises »

## FOR PHYSICIANS AND PATIENTS

**FORTNIGHTLY SAILINGS TO THE WEST COAST OF SOUTH AMERICA.** With first and intermediate class accommodations are listed in a folder offered by the Grace Line (ME Item 10-32), 19 Hanover Square, New York.

**A TOURIST MAP OF FRANCE,** containing also a sight-seers' map of Paris and a motor tour map of North Africa, has just been released for distribution by the French Line (ME Item 10-32), 19 State St., New York.

**SOUTHERN HEMISPHERE WORLD CRUISE:** Sailing from New York January 7, in the new Cunard Liner Carinthia and visiting 35 ports before it returns to New York 139 days later, this cruise is one of the outstanding travel adventures of the coming season. A colorful folder giving the highlights has been issued by the Cunard Line (ME Item 10-32), 25 Broadway, New York.

**A GUIDE TO AND FROM NEW YORK:** The big feature of this new folder is a large-size map of New York City, showing the high spots to visit. It also gives a list of hotels and theatres. It is offered by the Baltimore & Ohio Railroad (ME Item 10-32), Chanin Bldg., New York.

**HIGHLIGHTS:** A new booklet by this title tells how to save money on that European trip by traveling tourist class, and proves by pictures that tourist class is a pretty comfortable way to travel. Write: Red Star Line (ME Item 10-32), 1 Broadway, New York.

**THE OCEAN TRAIL:** This folder gives the full details on a regular weekly steamship service between New York and Galveston, with a day's stop at Miami in each direction. Write: Clyde-Mallory Lines (ME Item 10-32), 545 Fifth Ave., New York.

**CASTLES ON THE LOIRE,** a 36-page booklet, charmingly illustrated with original photographs, woodcuts and maps, may be obtained from the General Agency of French Railways (ME Item 10-32), 701 Fifth Ave., New York.

**WINTER IN NEW ENGLAND:** This booklet has all the information you need to plan out a winter-sport excursion to New England. A long list of accommoda-

tions adds to its usefulness. Write: Boston and Maine Railroad (ME Item 10-32), North Station, Boston, Mass.

**EUROPEAN HOLIDAYS IN YOUR OWN AUTO:** In this folder are given instructions for the shipment of your car abroad, and automobile transportation rates to the principal south European ports. To obtain a copy, address your request to the Cosulich Line (ME Item 10-32), 1 State St., New York.

**PICTORIAL OF HAWAII:** As interesting as a magazine of travel is this large magazine-like brochure on Hawaii. The illustrations are in rotogravure, and there are plenty of them. Copies are offered gratis by the Matson Line (ME Item 10-32), San Francisco.

**AIR TRAVEL IN EUROPE:** This folder describes cruises over the Mediterranean, flights from London, and the regular air services between London and Western Europe. It is offered by Imperial Airways Ltd. (ME Item 10-32), 578 Madison Ave., New York.

**SAXON ENGLAND:** For full information about this section of the British Isles, write: C. Rayner-Smith, General Agent, Great Western and Southern Railways of England (ME Item 10-32), 500 Fifth Avenue, New York.

**WHERE TO GO IN AMERICA:** A 96-page catalog of itineraries, including vacations by rail, week-end cruises, and motor coach tours. Write: Thos. Cook & Son, Wagon-Lits, Inc. (ME Item 10-32), 587 Fifth Avenue, New York.

**CARLSBAD CAVERNS:** A 64-page travel folder devoted to America's most famous cave formations, including their history and geology. Write: Santa Fe (ME Item 10-32), 505 Fifth Avenue, New York.

[TURN THE PAGE]

**Editor's Note:** These brevities are listed as a service to our readers. It will facilitate the handling of your request, when writing to companies, if you will include "ME Item 10-32" as part of the address.

# Complete Evacuation in 24 Hours . . .

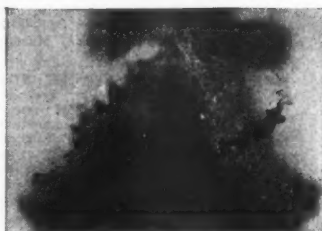


Fig. 1

24 hours after the administration of 1 tablet of Feenamint (containing  $1\frac{1}{2}$  gr. yellow phenolphthalein) almost complete evacuation of a barium meal (given 24 hours before the Feenamint) had occurred. (Fig. 1.)



Fig. 2

The same amount of yellow phenolphthalein in tablet form shows only slight partial evacuation in 24 hours. (Fig. 2.) complete evacuation required 48 hours or double the time required for Feenamint Action.

These cases are typical—Because the phenolphthalein is “chewed” out of Feenamint it works more rapidly than when the whole dose is swallowed in tablet form.

*Shall we send you a sample for trial?*

Yes please, sample of Feenamint ME-10

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**VACATIONS IN CANADA:** This is a 112-page handbook of information for tourists and sportsmen, including a resumé of fishing and hunting regulations in the various provinces. Free by writing National Development Bureau, Department of the Interior (ME Item 10-32), Ottawa, Canada.

**SEE THE PACIFIC NORTHWEST AND ALASKA:** Here is a folder done completely in rotogravure, than which nothing better reproduces the scenic beauty of these sections. For a copy write: Missouri Pacific (ME Item 10-32), 13th & Olive Sts., St. Louis, Mo.

**ENGLISH LAKE LAND:** Detailed, descriptive literature, illustrated with photographs of this quaint section of England, will be sent to physicians without charge by T. R. Dexter, Passenger Traffic Manager, London Midland and Scottish Railway (ME Item 10-32), 200 Fifth Avenue, New York.

**ALL-EXPENSE VACATION TOURS:** Cruises of comparatively low cost from New York and Boston to the Nova Scotia regions are fully described in a large travel booklet put out by the Eastern Steamship Lines (ME Item 10-32), Pier 13, North River, New York.

**BERMUDA AND THE BRITISH WEST INDIES:** A de luxe folder, actually an indexed, ready-reference work, embracing all the information a physician could possibly require in planning a visit to these islands, is offered without charge by the Canadian National Steamships (ME Item 10-32), 294 Washington St., Boston.

**THE MODERN WAY AROUND AND ACROSS AMERICA:** This brochure, listing seven all-expense tours to the principal vacation sections in and adjacent to the United States, may be secured gratis from Simmons Tours (ME Item 10-32), 1350 Broadway, New York.

**SEE GERMANY FOR \$5.95 PER DAY:** Here is a selection of nine attractive itineraries for inexpensive, independent tours in Germany. For a copy write the North German Lloyd Line (ME Item 10-32), 57 Broadway, New York.

**12%-DAY ALL-EXPENSE TOURS TO NASSAU, BAHAMAS,** are now offered for \$125. Full description is contained in a leaflet offered to physicians by the Munson Steamship Line (ME Item 10-32), 67 Wall St., New York.

**NAPLES:** This 32-page booklet, outlining the principal points of interest, will be of value to any physician contemplating a visit to this Italian city. Upon request, a copy will be sent by the Italian Line (ME Item 10-32), 1 State St., New York.

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YOU are cordially invited to stay at El Cortez during your San Diego visit. You will enjoy the ideal location, with its view of beautiful San Diego Bay. Within walking distance from the theaters and downtown district. Free garage located in building.

Do Lunch Table of House Dinner at \$1.50

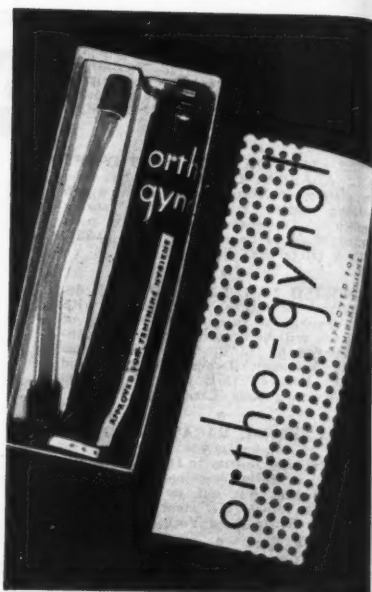
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FOR YOU



TO DECIDE

**T**his ethical and efficient means of vaginal hygiene is the instrument of your will. You are the judge who decides whether vaginal hygiene shall be employed; how long the patient's health shall require its continuance.

The confidence in Ortho-Gynol is based on three well-known facts. (1) Its proved dependability. (2) The professional background. (3) Its ethical introduction. Two years of Johnson & Johnson laboratory research—followed by clinical tests in leading hospitals—then introduced to physicians. The wide-spread professional interest in Ortho-Gynol is denoted by the amazing number of requests for samples and literature.

Ortho-Gynol is described minutely in a booklet distributed to physicians only. Ortho-Gynol gives double protection—chemical and mechanical. Its antiseptic ingredients are entirely adequate. Its base resists solution and remains where spread for several hours.

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You need not hesitate to prescribe Ortho-Gynol for vaginal hygiene (with or without pessary); also for local treatment of Vaginitis and Leukorrhea.

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To any practising physician who has not already been supplied, we shall gladly send a full-size tube of Ortho-Gynol (lettered or unlettered) with applicator (actual value \$1.50).

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APPROVED  
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October

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## Talk Business

[FROM PAGE 13] that his medical bill deserves just as prompt attention as any of his other debts.

Coming to the third class of patient (those whose intentions are honest, but who cannot pay because of unemployment or other circumstances) we are faced with a very real problem. The number of these patients has increased vastly since the beginning of the depression. When the inability to pay is genuine, which fact can be elicited by frank discussion with the patient, and where credit bureau records show his previous paying habits to have been good, there is obviously only one procedure: give the patient whatever treatment is urgently necessary for protection of his health and comfort, and agree to postpone payment until that becomes possible.

I am not an arbiter of professional ethics, but that is how we handle the matter in our clinic.

I do, however, take the precaution of asking the patient to sign this little form:

Being at present unable to pay for services rendered by the \_\_\_\_\_ Clinic, I agree to pay the total sum of \$\_\_\_\_\_ for such services, in equal payments of \$\_\_\_\_\_ each, as soon as I am financially able to begin payments.

Signed \_\_\_\_\_

This document has no legal value whatsoever, but it has a very powerful moral value.

Of course many doctors who have practiced in the same community for many years, and who know their patients by first names, will raise their eyebrows at such formality. They prefer to say, "Don't worry about the bill, Frank. I'll carry you through."

I am merely setting down my methods for the individual physician to judge as he chooses, to extract from as much or as little as he pleases.

Among the fourth class (those who will avoid payment until definitely forced) are frequently patients who seize unnecessarily upon the depression as an excuse for postponing or omitting payment. These are the ones my doctor-acquaintance had in mind when he said: "They hear depression and slow-pay on all sides until slow-pay becomes a habit with them, too. They no longer consider it a disgrace to owe money."

A typical example of this class was Mr. C, whose wife had been operated upon. I knew that he was employed and able to pay, so when he came in one day, in answer to my reminders, I was prepared.

"These are hard times, you know," began Mr. C.

"You are right," I parried,

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(REG. TRADE MARK)

You can pay more but you can't get a better syringe or needle. Ask your dealer to show you the new



Write for free sample of the new



**X-ACTO** Hypo Needle made of V2A RUSTLESS STEEL  
R.T.M. KRUPP

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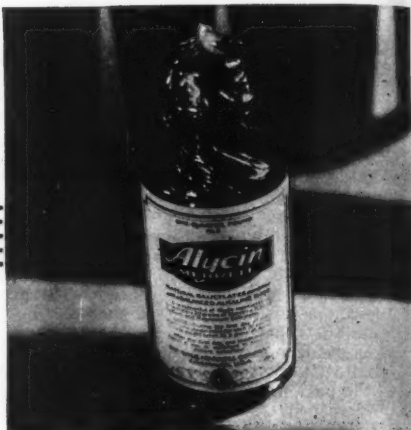
23 East 21st Street

New York City

## The Secret of Effective Salicylate Medication



MASSIVE DOSAGE  
AND THOROUGH  
ALKALINIZATION



Every physician realizes the importance of pushing the dosage of salicylates at the outset of treatment, in order to effect the desired rapid salicylization of the patient.

The difficulty has been to give adequate dosage without at the same time setting up objectionable side effects. This difficulty has now been overcome with the introduction of

# ALYCIN

Alycin combines in one formula Merrell's Natural Salicylates with a balanced alkali. Long years of clinical experience show that Merrell's Natural Salicylates can be given in large doses without gastric disturbance. The concomitant use of an alkali—the modern method of administering salicylates—aims toward a more rapid absorption, quicker effect, and helps to safeguard against cardiac dilation and the frequent accompaniment of rheumatism and febrile conditions—acidosis.

Special attention is directed to the balanced alkali formula which permits large dosage without disturbing the mineral balance, or producing alkalosis.

Let us send you a bottle of Alycin and complete information so that you can make a thorough clinical test of this modern form of salicylate medication.

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The Wm. S. Merrell Company, Dept. M.E. 10  
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Gentlemen: Send me a bottle of Alycin for clinical test.

Dr. ....

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"and I am glad you came in, for it gives me an opportunity to explain that our charges are made on a basis of fairness. For instance, a woman came to me the other day and said that she owed us an account of \$150 and that I had been writing to her about it. She also said that she had tried to raise some potatoes to make a part payment on the account, but that they didn't have enough for their own use, and had difficulty in getting through the winter.

"What about your husband?" I asked her.

"My husband is crippled. He is in a wheel chair."

"Where do you work?"

"At the poultry house."

"What wages do you get?"

"\$9.00 a week."

"What are your duties?"

"Picking chickens."

"You are mistaken about the account, Mrs. —. You don't owe us any money. Here is a receipt for your account."

Turning to Mr. C I say, "We didn't want her money and I don't believe you would."

Usually Mr. C squares his shoulders and says, "No, I would not, but of course my circumstances are not as bad as hers. I can afford to pay something."

Mr. C is starting to respond. He is, at least, more prosperous than one person he has just heard of.

It may require two or three other stories before he definitely shows, by his actions, that he is ready for this question: "Now what do you wish to do about your account?"

"I wish to pay for it."

This is not theory; neither is this case an unusual one. It is a simple practical plan that works.

It is true that the physician in individual practice cannot always copy this plan successfully. With many, it runs against the grain to discuss financial matters at all. If that is the case, the physician should have, if possi-

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is a dentifrice such as you have always wanted. It is ideal in every way and is a thorough cleanser.

For proof we want you to try the powder so send your professional card for full size can of Revelation and literature without charge.

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## Comfort for the Elderly Patient with Urinary Infection

ELDERLY PATIENTS with urinary infections, who are not in condition to endure radical procedures or even the usual diagnostic study, may frequently be kept comfortable from local symptoms for indefinite periods with no other treatment than Caprokol by mouth.

Send for literature.



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October

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ble, a secretary to take this burden from his shoulders. She needs special qualifications, and must be carefully trained, but that is a subject for another article.

Now we come to the fifth and last class of patients, the deadbeats. How can you recognize a deadbeat? You can't unless he happens to be so reported by the local credit bureau.

The best safeguard against this type of patient is to get full and accurate information about EVERY patient at the time of the first visit.

This serves two purposes: (a) It scares away many a deadbeat who comes with dishonesty in his heart. (b) It simplifies later follow-up of those who elect to remain as patients.

At this point let me say that I would like to see these rules posted carefully on every physician's desktop:

1. In taking the patient's name, be sure that the surname is correctly spelled.

2. Always ask for the full first name as well as the middle initials of the patient.

3. Record the occupation of the patient, or of the patient's husband or parent, as well as the concern where employed.

4. Record carefully the residence address, and if a business address is available, record both.

5. Take extreme precautions with persons who give a rooming place, or office building, as their address.

6. Take extreme precautions also with patients who have no telephone at their residence address.

7. Get detailed information on all persons who give an out-of-town address.

8. Always ask a new or unknown patient who referred him to the doctor, and record that

## WHOLE WHEAT

### ... its advantages in the diet.

"The greatest advantages that would accrue to the American people on the adoption of whole wheat would be a very decided and very beneficial increase in the intake of iron, in undigestible residue, and in the intake of water-soluble B and fat-soluble E vitamins."

Whole wheat notably makes up deficiencies in diet.

Calcium, phosphorus, iron, bran, vitamins...these are the important additions to the diet furnished by whole wheat.

Your suggestions on diet carry great weight and authority behind them...these facts on whole wheat will interest you.

Doctors will find a wealth of valuable clinical material interest-

ingly presented in two booklets we have which are yours for the asking. We shall also be glad to send you as many pamphlets entitled, "The Story of a Grain of Wheat" as you want, so that you can give them to your patients.

\*Victor E. Levine, M.D., Ph.D.,  
Archives of Pediatrics, May, 1929.

Bureau of Whole Wheat Foods  
NATIONAL BISCUIT COMPANY  
"Uneeda Bakers"

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#### Mail This for Interesting Literature

Gentlemen:

Please send me ..... pamphlets and data on whole wheat.

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State .....

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*Colloidal adsorption* is the rational and safe way to remove excess acid from the hyperacid stomach with minimum irritation of the gastric mucosa.

ALUCOL, an allotropic form of Hydroxide of Aluminum, with colloidal properties and high adsorptive power for HCl, is an efficient means to this end.

ALUCOL is non-toxic, is not systemically absorbed, leaves sufficient gastric acid to permit continuance of peptic digestion, and forms a soothing and protective gel over the gastric mucosa.

Further, ALUCOL does not cause a secondary and more pronounced rise of acidity, which often follows excessive use of alkalis in the stomach.

*Use Coupon Below for Trial Supply  
of Alucol and Full Information*



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Dept. M.E. 10

Please send me, without obligation, a container of ALUCOL  
for clinical test, with literature.

Dr. ....  
Address .....  
City ..... State .....

person's name and address on the ledger card.

I said earlier in this article that I was not hard-boiled toward patients. Let me modify that by saying that I approach the hard-boiled state when I meet a *known* deadbeat.

I say something like this:

"I am sorry, Mr. J, but in our business dealings with patients we are forced to rely to a great extent upon reports given us by other business people in the community. Unfortunately I find that you have been in dispute with others over the payment of bills, and I must ask you to make arrangements to pay for treatment in advance."

I know of a dentist who does an enormous practice, whose invariable rule is to request a deposit of twenty dollars—provided the work is to amount to that much—before he as much as begins. Smaller bills are paid for in cash when the work is completed. His office is always crowded; his time is dated up for weeks in advance; and he employs three capable assistants. Everybody speaks well of him, for his work is high grade.

Not every physician can do this, or would he want to. But I am convinced that easily three-fourths of the credit losses of the average doctor could be avoided if either he or his secretary would exercise care in getting complete and accurate information about the patient at the time of the first interview, and would study the peculiarities of each case as it falls under these five classifications, adopting an appropriate attitude in dealing with it.

In conclusion, let me quote what a well-known specialist once told me, and which I have never been able to forget: "Charity is the middle name of every physician. But when charity is forced, it is nothing other than being held up. Merely the pistol is lacking."

## The World's Purest Castor Oil



### KELLOGG'S *tasteless* CASTOR OIL

Super-refined by the exclusive Kellogg Patent process, Kellogg's Tasteless is the only refinery sealed castor oil in America, and is bottled within six hours after refining.

Contains no aromatics or preservatives of any kind—absolutely pure—always fresh—full strength—high quality exceeds all U.S.P. requirements.

Be sure to specify "Kellogg's Tasteless Castor Oil" in original refinery-sealed bottles.

3 oz.—25c    7 oz.—50c

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Dr. Podolsky says "Arouse the secretions of bile by administration of the bile salts (Sodium Glycocholate and Taurocholate). Start off with a rather large dose and continue until free bile appears in the stool, then reduce the dose."

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Compound — for  
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inflammation of  
the mucous mem-  
branes, especially  
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M.D.

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# How to Incorporate a Group

[FROM PAGE 15] nishes the capital and the physical equipment required to practice medicine and surgery, and leaves the acts of practicing to the licensed physicians working in its behalf as employees, servants, or agents.

Furnishing the wherewithal to conduct medical and surgical practice is distinctly different from performing the activities of practice. This legal point seems to be the chief reason why many physicians believe that corporations actually practice medicine in violation of the law.

The corporation merely exercises the right to supply the appliances and organization necessary to render medical and surgical service.

Granting the advantages and the legality of group practice under corporate form, what are the steps to follow in organizing a group?

Because of the marked differences in corporation law, among the various States, it is an utter impossibility to outline a plan of organization which is applicable to all communities and under all circumstances. I shall endeavor, however, to describe certain fundamentals which interested physicians should consider before undertaking to work out details with their own lawyers.

The first question to be settled is *where* to incorporate. Shall it be under the laws of the same State in which the group intends to practice, or shall it be in some other State?

The reply to this question hinges largely on the stringency of the corporation laws of any given State. Some States have rendered the formation of small

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THE CHAIR WITH A LIFE-TIME GUARANTY



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RAISES—LOWERS—REVOLVES—RECLINES  
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By which is meant that we consider your patient too.

The scrupulous care given here to *your* special interests the "tuto and cito"—in modern parlance perhaps "potency, stability and absorption" is supplemented by a thought for the patient's comfort. Palatability, of course, we seek.

But of more importance is comparative painlessness in injection, absence of reaction.

Hyposols, The Drug Products Ampul preparations, are made with every known precaution to avoid pain and untoward by-effects.

Consider Bi-Na-Gluconate—a colloidal aqueous solution of bismuth for intragluteal use in lues, that is practically painless, rapidly absorbed, slowly eliminated and energetic in spirocheticidal effect.

May we tell you more about Bi-Na-Gluconate and other Hyposols?



The Coupon will bring you literature and samples.

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Yes, please, literature and samples on Bi-Na-Gluconate.

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corporations a rather impractical procedure. In other States the laws governing the formation of corporations are so strict that they become burdensome, either financially or otherwise. Nevertheless, there are certain States, among the most prominent of which are Maine, Delaware, New Jersey, Arizona and Florida, in which the formation of a corporation is a relatively easy matter.

In this connection, attention is directed to the fact that some of the largest corporations in the country have obtained their corporation charters in States other than those in which they have their home offices. Such corporations find it prudent to do business in the home State as a foreign corporation—and, there's a reason.

Any group of persons capable of making a valid contract may combine to organize a corporation. The number required varies in different States; but the least number required is three. Also, in some States, the incorporators, or some of them, must be residents of the State in which the charter is applied for.

Where several physicians desire to incorporate but lack the number of persons required by law, any adult member of their family, any employee, or any assistant, may be utilized to make up the deficiency in numbers. In many States even a single person may eventually become the sole owner of a corporation. Taking in persons for the purpose of acquiring a sufficient number to form a corporation under the laws of the State, need not in any way interfere with the control or ownership of a corporation. Usually arrangements are made in advance whereby the others relinquish their shares of stock as soon as the corporation charter has been obtained.

Generally, the initial subscribers to the stock of a corporation are also its first directors and

# Thialion

is a dependable agent to prescribe in rheumatism, gouty conditions, biliousness, constipation and wherever there is evidence of acidemia or decreased alkalinity.

*Literature on request*

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HART NASAL JELLY

For  
COLDS

It combats the cause as well as the subjective symptoms.

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35 S. W. 2nd St., Miami, Florida.

Please send me trade size tube of Efedron free.

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A New  
Gerber  
Product



# Baby's Cereal

Ready-to-Serve  
Long-Cooked in Whole Milk

**G**ERBER'S Strained Cereal is made from finely ground whole wheat, hulled oats, and added wheat germ, with sufficient whole, fresh milk to provide the desired consistency. It is softened and thickened by cooking in glass lined retorts at 10 pounds steam pressure in order that soluble nutrients in the bran may be retained. The harsh bran particles are removed by straining through finely perforated monel metal screen. The consistency of the strained cereal is adjusted as necessary by evaporation under vacuum or with the addition of more milk. The product is then filled in steam-washed cans and immediately sealed. Final cooking proceeds by the Gerber process in a closed system under steam pressure.

Except for the extra wheat germ, nothing is added to the natural, nutritive properties of the whole wheat and hulled oats. The cooking in whole, fresh milk lends additional food value and gives the cereal a distinctive flavor. No

further cooking is required. Merely warm to feeding temperature. Readily diluted with milk or water for bottle feedings.

#### Unseasoned

In preparing Gerber's Strained Cereal, no salt or sugar is added. The mother should be instructed to season as you wish for the individual diet requirement.

#### Send for Sample

We hope, in that it provides a combination of ideal factors, plus the insurance of regularity and uniformity in the observance of dietary regime in the home—that this newest Gerber Product may prove of definite service. We are anxious to have you examine the product. Won't you return the coupon to us today so we may forward a regular size package of the product for your examination?

*Strained  
Vegetables*  
Packed in 4½ oz.  
cans 15¢

Tomatoes  
Beets & Peas  
Carrots  
Vegetable Soup  
Prunes  
Green Beans  
Spinach

## Gerber's STRAINED CEREAL



GERBER PRODUCTS COMPANY,  
Fremont, Michigan.

You may send me a sample of Gerber's Strained Cereal—also analysis and description of the product as filed for acceptance with the Foods Committee of the American Medical Association.

Name.....  
Address..... ME-23



Gerber's Strained  
Cereal is packed in  
10½ oz. cans 15¢

officers. Each State requires a definite number of directors for each corporation; and the officers usually required by law are president, treasurer, and secretary. The directors are the active managing heads of most corporations, and they should be selected with care, especially in those corporations in which they may not also be stockholders.

The powers and duties of the officers of corporations are usually set forth in the by-laws of the corporation; but in organizations in which those duties and powers are not specified in the by-laws, the statute laws generally give the following powers and duties to them:

The president is the presiding officer over the directors and the shareholders. By virtue of his office alone, he can neither independently bind the corporation or control its property. The presi-

dent may be viewed as an agent of the corporation possessing no greater powers than those that are specifically bestowed upon him either in the by-laws, or as the result of statute law.

The treasurer of the corporation is the custodian of the corporation funds, and to him, as a rule, falls the duty of making all disbursements authorized by the directors.

The secretary keeps the minutes, has custody of the corporate seal, and performs such other duties as may be imposed upon him by the directors and other officers.

The directors of a corporation have unusual powers. They are the administrative officers of the corporation, having complete charge of the corporation's business and property. In fact, unless explicitly specified to the contrary in the by-laws of a corporation, the directors usually have the power to do anything which



## HAYDEN'S

### VIBURNUM COMPOUND

**W**OMEN, active in society, sports and business are grateful to the physician who prescribes a safe Antispasmodic and Sedative. HVC has been the standard of therapeutic efficiency with three generations of the profession, not only in obstetrics and gynecology, but in general medicine. It contains *Viburnum Opulus*, *Dioscorea Villosa* and Aromatics but no narcotics, and it leaves no harmful after effects.

Put up in 4 oz. and 16 oz. bottles.  
Sample (to the Profession) on request.

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BEDFORD SPRINGS  
BEDFORD, MASSACHUSETTS, U. S. A.

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ANTISPASMODIC AND SEDATIVE

# Valuable for insomnia

Men of the profession, in the course of their practice, have come upon family remedies that accomplish results without a precise physiological explanation. Absorbine Jr. for simple insomnia seems to be one of such remedies, because 9 people out of 10 who have tried it report favorable results.

The procedure they follow is simple. They merely pour out a palmful of Absorbine Jr., and rub it on the back of the neck, just before retiring. In bed, breathing deeply and evenly, they find that Absorbine Jr.'s fragrance, and its cooling, soothing effects at the base of the brain, induce drowsiness and sleep. Used externally, it is not drugging, habit-forming or fattening.

Perhaps the best evidence we can offer the profession is a trial bottle of Absorbine Jr. Write us today for a generous free sample, and try it yourself or recommend it to patients for simple insomnia. Absorbine Jr. is sold at all drug stores, \$1.25 the bottle. W. F. Young, Inc., 207 Lyman St., Springfield, Mass. *In Canada: Lyman Building, Montreal.*

## ABSORBINE

for years has relieved sore muscles, muscular aches, bruises, burns, cuts, sprains, abrasions



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'Athlete's Foot'

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in their judgment may be for the best interests of the corporation, so long as their acts are lawful. Corporation directors have been adjudged by some courts as combination trustees and special agents, with combined powers which exceed those of either trustees or agents acting specifically as such.

To retrace, let us assume that Doctors Brown and Jones are now engaged in practice on a partnership basis. Their first step will thus be to determine whether it is most prudent to incorporate in the State in which they propose to conduct their group practice, or to incorporate in some other State and function at home as a foreign corporation. Due to the many factors involved in connection with each organization, the answer to this question depends largely upon individual circumstances.

The next problem for Doctors Jones and Brown to settle is just who the original incorporators shall be. This also depends upon individual circumstances. Sometimes it is advisable that Doctors Jones and Brown be among the original incorporators; in other cases it may be more prudent not to have their names on the original charter at all. In the latter instance, they can buy their shares from the original subscribers as soon as the charter has been granted.

But assuming that Doctors Jones and Brown desire to appear as original incorporators, according to all the laws in the United States, they cannot incorporate in any State with less than three persons. In order to overcome this numerical deficiency they can get some adult relative, some assistant, or some friend to fill the breach—realizing, of course, that after the charter has been granted they can acquire all the stock of the third party. (This illustration presupposes that the State in

## To lessen cardiac excitability

as in paroxysmal tachycardia, or extrasystoles, is one of the bromide functions most usefully performed by

### PEACOCK'S BROMIDES

Peacocks Bromides exhibit a synergistic combination of the bromides of Potassium, Sodium, Calcium, Lithium and Ammonium—with the full sedative and hypnotic effect of an equivalent dose of Potassium Bromide—but with far greater tolerance, less gastric irritation, and less risk of bromism.

Hence Peacock's Bromides are preferred when bromide medication must be continued over long periods, as in Epilepsy, Sexual Hyperesthesia, Spastic Conditions of the Motor Tract (Multiple Sclerosis, for instance).

Each teaspoonful (60 minims) Peacock's Bromides contains 15 gr. combined bromide salts.

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# NEW!

## THE HYPO OUTFIT YOU'VE ALWAYS WANTED



*With a live rubber tray. . .one that protects  
the contents against breakage when dropped  
...prevents spilling when overturned.*

Now the makers of VIM products have given the medical profession a new and modern Hypo Outfit—one it has long wanted. The new VIM gives you freedom from breakage and spilling...a thin, convenient case...sturdily built...that fits easily into the pocket.

In place of clumsy metallic clips or fasteners you get a live rubber tray. One that holds tight indefinitely—with nothing to repair or replace.

This rubber tray absorbs the shock if dropped...prevents damage to the contents. It holds contents tight, even when the case is tipped upside down.

Easily sterilized, without removing the syringe or needles. Put the live rubber tray into the sterilizer—or the entire case, removing only the vials.

No other Hypo Outfit has such a combination of advantages—thin, strong...with bulkiness eliminated the new VIM gives you an outfit that fits easily into your pocket. And new freedom from petty annoyances of older type outfits.

Examine this new and improved VIM Outfit at any surgical instrument dealer—or order it subject to return if it is not all we claim it to be. The price is \$5.50.

Just ask for the New VIM Hypo Outfit with the contents cushioned in live rubber—protected against breakage and spillage—with no metal parts to loosen—nothing to replace or repair. And know that this thin pocket-size case will last you a lifetime.

**MacGREGOR INSTRUMENT COMPANY**  
**Needham, Mass.**

which the corporation is to be chartered requires only three persons to form a corporation.)

Having decided these matters, Doctors Jones and Brown have their charter application drawn up, with the by-laws of the corporation, and send it to the proper authorities. If the application has been correctly drawn up according to the law of the State in which the corporation charter is applied for, they will receive incorporation papers in due time. They shall then have to obtain a license to operate as a foreign corporation in their home State before they may lawfully engage in practice.

If the charter has been granted in the same State in which Doctors Jones and Brown are engaged in practice under a partnership form, then the only further step required of them is to dissolve the existing partnership

according to law. They can then engage under the corporate form of group practice at once, upon receiving incorporation papers.

Now, let us ask, what personal advantages accrue to these physicians by having changed from the partnership to the corporate form of group practice? First of all, under the partnership laws of most States, should any partner die, the partnership is automatically dissolved. Conceivably, such a happening might cause serious troubles and difficulties to the other partners should disputes arise over the settlement of the deceased partner's estate.

Then too, under the partnership form of practice, debts incurred by any one partner customarily become those of the entire partnership, for which all the members may be held jointly and severally liable. The same applies to liability arising as the result of the negligent act of any partner, for which liability dam-

## The Value of a Name

In no other line of business does the value of a name achieve such importance as in the Medical Profession. It provides a standard of measurement by which other things are judged.

For over 80 years Eimer & Amend have been manufacturing and selling medicines, drugs, chemicals and laboratory supplies to the medical profession, and building a name which has become recognized as a guarantee of purity, quality and reliability. You may prescribe with confidence any drug, chemical or medicine bearing the Eimer & Amend label.

*Among our specialties are*  
**IODOTONE • MYODINE**  
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# For Relief of the Chronic Headache



When patients consult you on the common subject of frequent headaches, you invariably bring up the question of elimination.

For it is generally known that certain types of headache result from intestinal toxemia, which has been preceded and brought about by faulty elimination.

Sal Hepatica is mildly laxative

in effect. It sweeps the intestinal tract free from toxic waste and effectively combats the trouble at its source.

Sal Hepatica is efficient, palatable, and easily obtained. It has been favorably regarded by physicians since 1895. Mail the coupon for a quantity sufficient for clinical test.

## ★ Sal Hepatica ★

**MEMO to my assistant:** Send to Bristol-Myers Co., 71 M West St., New York, for a professional sample of Sal Hepatica (gratis)

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ages may be sought. The negligent act of any one partner, assistant, employee, or even agent of the partnership, renders every other partner as well as the entire partnership liable, so that if the negligent party proves to be execution-proof, the other partners may have to pay.

Under the corporate form of group practice, one or all of the individual shareholders may die without disrupting the legal existence of the corporation. Also, under this form of practice, new shareholders may be added, depending upon the number of outstanding shares of the corporation.

Only in rare exceptions, do the individual shareholders, officers, or directors of a corporation, become personally liable for the debts of the corporation. Then too, should any shareholder of the corporation, any servant, employee, or agent, act negligently, so that damages for such negligence may be claimed, then the corporation alone as an entity is liable—not its shareholders, its employees, or its agents, as individuals.

If the corporation, through its officers, agents, or employees, obligates itself beyond its powers to pay its debts, the shareholders do not, as a rule, become personally liable for the unpaid debts of the corporation.

But, you may ask, if the corporation can not lawfully practice medicine as such, how can it handle the group organization so that its financial and professional conduct may not conflict with the law?

In order really to understand this angle of the matter, it becomes necessary to grasp the fundamental relationship existing between principal and agent, as known in law. Abstractly defined, whenever any person or group of persons delegate to another a lawful right which the

## ECONOMY

### in Liver Therapy

**D**OCTOR WILLIAM P. MURPHY of the Peter Bent Brigham Hospital, Boston, Mass., recommends (Journal A.M.A., March 26, 1932) the use of intramuscular injections of material derived from 100 grams of liver as an economical and satisfactory method of treating pernicious anemia.

### Solution Liver Extract

*Lederle*

*is a concentrated product marketed in packages of three vials, of three cubic centimeters each the material obtained from 100 grams of liver. Sample to physicians upon request.*

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INTEROL is as physicians want a mineral oil to be. INTEROL is better than U.S.P. Standard. It is clinically correct. It is double-acting—a lubricant and an absorbent. And it is the original Russian Mineral Oil as used by the American Medical Profession.

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# THE FIRST THOUGHT IN BURNS

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Unguentine has long been the first thought and continues to be the last word in the treatment of first and second degree burns—BECAUSE

1. It is analgesic and antiphlogistic.
2. It is positively antiseptic and germicidal.
3. It is effective under the conditions of practical application—in the presence of serum and organic matter.
4. It is non-toxic, detoxifying—promoting quick healing, usually without scar.

No other medium for treating burns possesses ALL these qualities.

The Norwich Pharmacal Company  
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second person does not possess, a relationship of principal and agent arises in which the delegating party is the principal, and the party to whom the right has been delegated becomes the agent.

Now, corporations, by virtue of being such, have the right to appoint agents to act lawfully for them in their behalf. Conversely, third persons have the right to appoint a corporation to act as their lawful agent also. It follows that although the corporation formed by a group of physicians may not lawfully be able to practice medicine, the corporation has the right to appoint as many licensed physicians as it desires, to act as its agents to practice for the corporation and in its behalf.

Furthermore, these same physician-agents who may agree to practice for and in behalf of the corporation, *have the right to appoint the corporation to act for themselves in handling their financial affairs.*

In other words, a group of physicians may obtain every benefit inherent in practice under corporate form, without personally handling the revenue received from patients.

The expense of incorporating is not prohibitive; in fact, it is insignificant considering the potential advantages of this form of practice which is the logical answer to state medicine and similar bugaboos facing the medical profession today.

Corporate group practice deserves thorough discussion and study by physicians everywhere.

By its means, doctors may do on a small and efficient scale what the big corporations are doing on a large scale. And, if they appreciate the wisdom of keeping laymen out, they will be able to render better and cheaper services to an institution-minded public.

---

# NEPENTHE

## Carminative, Anti-Spasmodic, Sedative

A superior corrective of acute gastro-intestinal disorders, so common during the summer months. Composed of blackberry root, nutgalls, sodium bicarbonate, ginger and prickly ash bark, skillfully blended with choice aromatics.

Sample free to physicians upon request

*Prepared only by*

**THE TILDEN COMPANY**

*Pharmaceutical Chemists since 1848*

New Lebanon, N. Y.

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# Endomin Tablets for ANAEMIA

Rational in formula...because they follow the trend of recent medical opinion by combining Copper and Manganese with the regenerating power of Iron.

Primary and secondary anemias can be successfully treated with Endomin Tablets, without the unpleasant sequelae of gastric disturbance. The dosage is 2 to 3 tablets, t.i.d.

A quantity for clinical trial gladly sent to physicians.



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## Without Cash

[FROM PAGE 21] There is Brown, who operates a welding shop in our town and who used to do a good business in second-hand engines. He had owed me a bill for two years, and one day, when I saw him, I asked him why he ignored my statements.

Fairly glaring at me, he answered: "Everyone in town owes me, too, Doc. I'm eating, yes, but that's only because a few grocers in town are in debt to me."

"You can get sugar and flour and canned goods from them, can't you?"

"Yes, but what has that to do with it?"

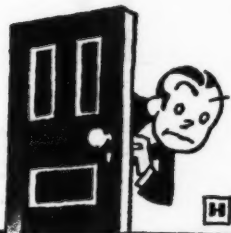
"Just this. If you can't use all the supplies you are able to get, I'll take some off your hands at whatever price you are charged and check it off your bill."

"Will you?" Obviously, he was relieved.

The bargain was struck. Within a week, I had a hundred-weight each of sugar and flour and about three dozen cans of variegated vegetables and fruits.

Meanwhile, I was having my grounds improved with flagstone walks; both the material and the labor for this job were in payment for previous medical services. For the work, I paid the regular day-labor rates prevalent in our county, crediting this to my patient, who would otherwise have been running into debt for what was a prolonged treatment. The material came from a man who had been my debtor for four or five years, and who was glad to be rid of superfluous stone on his property. So the flagstone walks became not only a boon to me but to my out-of-work patient and to the purveyor of the stone.

About the same time I welcomed an opportunity to have my house painted. Bill Foster was a painter whose time was by no means wholly occupied. He had



## next patient!

60% of all skin diseases can be treated successfully by the G.P., estimates a skin specialist. Earn the gratitude of your patients by examining for, and detecting, these conditions during routine visits.

Sounds impractical? Not when you see Goodman's **TREATMENT OF COMMON SKIN DISEASES**—which stands alone as the one practical handbook for the G.P.

It gives thorough working knowledge (with theory minimized) of the 13 common skin diseases. 300 prescriptions, 72 illustrations, 350 pages of text, compounding directions for creams, lotions, ointments. Explicit procedures for diagnosis and treatment.

8 out of 10 patients in the G.P.'s office need treatment for some skin condition. If you want to render a complete, modern service to your patients, you may well consider the price of this book—\$10.00—low for its potential benefits.

Just one of the clinically-tested prescriptions could be worth that. Prove this for yourself, on a money-back guarantee.

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TO CLIP THIS  
COUPON NOW



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I enclose check for \$10 for the new text "Rational Pharmaceutical **TREATMENT OF COMMON SKIN DISEASES**," by Herman Goodman, M.D. After 5 days examination, if I do not want the book, I will return it and my purchase price will be refunded in full.

.....M.D.

Address .....

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# R

## A cigarette for colds?...*Hardly!*

We put menthol into Spuds to refrigerate the smoke. We have a lot to say about menthol in terms of cooler smoke, cleaner taste and mouth-happiness.

But we never say a word about menthol in Spuds in terms of a remedy for colds and nose and throat ills . . . although we have been assured that there is a beneficial effect.

Our reason for this is, we believe advice to your patients about their ills should come from you . . . their doctor. You will interpret the Spud facts fairly, and pass the right kind of judgment. And that's all we ask.

# SPUD

**MENTHOL-COOLED CIGARETTES**

**20 FOR 20¢ (U. S.)...20 FOR 30¢ (CAN.)**

THE AXTON-FISHER TOBACCO CO., INC., LOUISVILLE, KENTUCKY

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fallen off a scaffold a year before, and had been a patient of mine for three months afterward. When he came to me and offered to give my house the coat of paint it needed, did I accept? I certainly did, without hesitation.

And then there was the hardware man, who was having difficulty with the bill for his wife's confinement. He paid part of his bill with a half-case of eggs that he himself had taken in exchange for merchandise. The rest he gave me in five gallons of varnish and some tools I needed for gardening.

Of the simpler forms of exchange, I might mention in passing that I collected a long-standing bill for a pneumonia case, in the form of ten bushels of potatoes, four hams, two slabs of bacon, a dozen chickens and as many bushels of apples as my car would carry away. I took care of the grocer's wife, whose arm was

broken, and received canned food supplies which will come in handy this winter.

A dry-goods merchant in town, catching the spirit of the thing, asked me if I would take merchandise for that appendectomy. He handles men's clothing and shoes, among other things, and I know that if I should need a suit, I shall be able to get it from him, even though said suit may not measure up to the standards I set for myself in the halcyon days of '28 and '29.

But no matter. Whatever happens this coming winter, my family and I shall be warm and fed and clothed against the rigors of northern winds.

A laborer is worthy of his hire. So say I. So say my patients to whom I have brought relief from suffering. But what will the Federal income tax man say about it?

# ERGOAPIOL (SMITH)



## AMENORRHEA DYSMENORRHEA and other MENSTRUAL DISORDERS

ERGOAPIOL (Smith) proves unusually efficacious in the various anomalies of menstruation arising from constitutional disturbances, atonicity of the reproductive organs, inflammatory conditions of the uterus or its appendages, mental emotions or exposure to inclement weather.

As a safeguard against imposition, the letters M.H.S. are embossed on the inner surface of each capsule. ERGOAPIOL (Smith) is supplied only in packages of twenty capsules each.

**Dose:** 1 to 2 capsules  
3 or 4 times a day.

**Literature on request.**

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Capsule cut in half through the seam, showing initials.



Capsule intact showing no mark objectionable to the physician.



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Physicians are prescribing TRENT in preference to plain Sodium Perborate because: (1) Patients prefer its pleasant taste. (2) TRENT contains Ortho-Iodo-Benzoic Acid, a valuable carrier of non-irritating, non-toxic and non-staining elemental iodine in combination with Sodium Perborate. (3) TRENT is conveniently packaged to insure proper dosage.

Have you tried TRENT? If not, write today for a package for clinical test or personal use.

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**R<sub>y</sub> IN ACUTE CORYZA  
OR ACUTE RHINITIS**

# PINEOLEUM

Reg. U. S. Pat. Off.

*Samples and Literature on Request*

THE PINEOLEUM COMPANY, Dept. M. E. . . . 52 West 15th Street, New York, N. Y.

## You Can Lead

[FROM PAGE 61] physiological survey being made of every one of my patients. This consists of (1) an electrocardiogram; (2) a basal metabolism check-up; (3) a complete blood chemistry.

Many patients rebel. Many prefer to guess. My philosophy with this type is simplicity itself—"Why take time to teach a Chinaman the alphabet if he won't try to learn it?" This type drifts around to other colleagues, and probably drifts away from them too. But a few sturdy patients stick to the health examination, once they are sold on its life value. These become the vanguard of medicine's future hope.

However, invariably, I ask these patients one leading and very essential question before giving up the effort.

This question is, "Would you

ride in an ignorantly built and untested elevator if you were going to the top of the Woolworth Building in New York?"

"Why, no, Doctor," invariably comes the reply.

"If you could save your eyesight by a yearly examination, would you do so?" is another query I often spring. And another in quick succession is, "Would you refuse to have your teeth X-rayed if you knew it would save you from being bed-ridden from rheumatism or from heart disease?"

Frequently such questions and their logical answers break the ground between the physician and his hearer. Out of every hundred men or women who were previously bored, or actually antagonistic, there will be found a few who are receptive to the health examination idea.

It is toward this few that we can and should devote our kindest efforts.



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In combining ADGENE with milk, American doctors now have a food beverage of exceptionally high nutritive value.

ADGENE is composed of carbohydrates, proteins, calcium, and phosphates. Sugar, cocoa and barley are elements, the latter modifying the fresh cow's milk. Where cow's milk is contra-indicated, ADGENE may be made with water.

Indicated in every condition, at any age, where a food or nerve reconstructant is required. Easily tolerated and assimilated. Not advertised to the public. Send for sample.

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From Pain  
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When your patients, old and young alike are affected and pain is the prime factor, TONGALINE affords relief in a few hours—at a small cost—Fall weather with its rapid temperature changes catches many unawares—causing sudden painful attacks of lumbago—rheumatism, arthritis and the like—the progress of business—the home and the school—is retarded unless quick relief is obtained.

TONGALINE is an eliminant—prevents retention of toxic products—with greater effectiveness than Salicylate alone.

The formula is on every package—the literature is convincing.

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2112 Locust Street, St. Louis, Missouri.  
Yes, send liberal sample of TONGALINE.

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# MOST EFFECTIVE FOR NOSE AND THROAT

**A** SOOTHING, anticongestive preparation for local treatment of the nose and throat. Used by nasal instillation; as a gargle; and by inhalation, with a nebulizer.

**Formula.** Mistol contains in suitable proportions, camphor, menthol, eucalyptol and chlorbutanol in a light liquid petrolatum vehicle. The viscosity of the liquid petrolatum is such that it spreads rapidly and evenly over the mucous membrane and keeps the medication in contact with it for the longest possible time.

**Indications.** For relief of common cold, laryngitis and bronchitis; to check congestion and discharge in conditions of nasal catarrh; to alleviate minor irritations of the throat; and as an aid in the relief of acute paroxysms of asthma and hay fever.

**Administration.** The Mistol dropper is rounded at the end so as to avoid any possibility of injury to the nasal membranes.

In order to have the medication reach the affected parts, Mistol should be dropped into the nostrils with the head held well back until the liquid is felt in the back of the throat. When gargled, Mistol has been found effective in treating minor affections of the throat. It may also be vaporized with a nebulizer, to reach the upper bronchial tubes by inhalation.

**Quality.** Behind Mistol is an organization having access to the world's finest raw materials, the latest and most complete laboratory equipment, highly trained chemists and unsurpassed manufacturing facilities. The honor and reputation of the manufacturer of Mistol stand as a guarantee of its quality.

# Mistol

REG. U. S. PAT. OFF.

*For head colds and sore throat*

MADE BY THE MAKERS OF NUJOL

Note: This advertisement was written by a registered physician. © 1932 Stanco Inc.



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